Year One Process Evaluation Highlights

One ME
Stand United for Prevention

January 2005

YEAR ONE PROCESS EVALUATION HIGHLIGHTS

Produced for
Office of Substance Abuse
Maine Department of Health
and Human Services

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PURPOSE OF THE REPORT

The purpose of this report is to highlight the results of the first year local level process evaluation of One ME. It is comprised of sub-sections of the interim evaluation report submitted to the Office of Substance Abuse in November 2004 by the One ME evaluators, RTI International (RTI) and Hornby Zeller Associates (HZA).

The following two chapters contain results from two coalition-level surveys administered by RTI: the *Coalition Coordinator Survey* and *Coalition Member Survey*. The remaining chapters present the findings of three surveys administered by RTI and HZA:

- *Model Program Training Survey;*
- *Program Implementation Checklist;* and
- *Environmental Strategy Team Member Survey.*

The *Model Program Training Survey* is administered to all program facilitators and coalition and community members who attend training by on specific model programs. Aggregate results are presented in the fourth chapter of this report and program-specific results are shown in Appendix A.

Fidelity to program models is assessed with an instrument called the *Program Implementation Checklist*. The data collected in year one from the *Checklists* are summarized in the fifth chapter of this report.

One of the tools used in the evaluation of the One ME environmental strategies is a survey administered to all of the local people planning for and implementing either Communities Mobilizing for Change on Alcohol (CMCA) or Community Trials Intervention to Reduce High-risk Drinking (CTI). These people form teams commonly known as "strategy teams." Aggregate results of the *Strategy Team Member Survey* are contained in the One ME Environmental Strategies chapter. The environmental strategies chapter also provides a brief overview of the activities of the One ME environmental approaches. Appendix B provides the specific activities in which the communities are engaged.

OVERVIEW OF FINDINGS

Coalition Coordinator and Coalition Member Surveys

More than half of coalition coordinators work full-time and live in the community that they serve. Many (40%) have at least three years of experience in substance abuse prevention. Most of the coordinators are happy with the representation of various community sectors on their coalitions and with the skills and resources their members bring to the organizations. About three quarters of the coordinators see their coalitions as somewhat to very effective. Specifically, they see their coalitions' strengths in the areas of communication and networking and increasing collaboration and cooperation in the communities. In terms of technical assistance, coordinators expressed the most interest in assistance with the evaluation of program activities, the development of an action plan, and the sustainability of prevention programs.

Two hundred forty-four coalition members completed the *Coalition Member Survey*. Overall, members care about their coalitions, feel that they have a voice in the direction of the coalitions and are satisfied with the operation of the coalitions. Members give their leaders high rankings in terms of competence, vision and their abilities to "get things done." Members report little internal conflict within coalitions, but did note a number of barriers they face in their communities. The biggest of

those are denial and apathy in the community toward substance abuse problems, lack of community awareness of substance abuse problems and lack of resources for substance abuse prevention.

Model Program Training

One hundred forty-two people sent *Model Program Training* Surveys back to evaluators. These 142 people attended trainings by the developers of 15 of the model programs. Overall, trainees rated the trainings and trainers favorably. The trainings increased the trainees' perception of the effectiveness of the model programs and prepared them well to implement the programs.

The following seven programs received overwhelmingly positive ratings in terms of the training provided:

- All Stars
- Communities Mobilizing for Change on Alcohol
- Creating Lasting Family Connections
- Guiding Good Choices
- LifeSkills Training
- Lion's Quest
- Reconnecting Youth

Class Action, Parenting Wisely, Positive Action and Second Step were rated least favorably among all of the trainings.

Fidelity of One ME Model Programs

Research-based model programs have been implemented and evaluated and have produced consistent, positive and replicable results. For this reason, One ME has placed an emphasis on implementing programs as close to their original design as much as possible. While fidelity to the models is important, researchers in the field of prevention recognize that complete fidelity is not always possible. To assess fidelity the One ME evaluation team administers the *Program Implementation Checklist* to program facilitators.

The *Checklists* indicate that most of the adaptations in the first year of program implementation were changes to the intensity or "dosage" of a program. Nearly one-half of the programs were delivered either in a shorter timeframe or longer timeframe than that prescribed by the model program. Over 40 percent of the programs involved some change to the length of the sessions and a third of the programs were modified in terms of the number of sessions delivered. Most of these adaptations were made as adjustments to school class schedules. One quarter of the programs made changes to the programs' content, mostly in the form of deletions of program components rather than additions or enhancements.

Given that it was the first year of implementation, it is not surprising that a quarter of the facilitators reported that their implementation differed from the original program design in terms of the instructor to participant ratio. It was difficult to anticipate the number of participants who would actually sign-up, attend and complete a program that had never been implemented before. It is expected that the number of modifications to the facilitator-participant ratio will decrease in year two of implementation.

Environmental Strategies

The results of the *Environmental Strategy Team Member Survey* indicate that prior to the strategy team members' participation in environmental approaches, they had numerous links with all sectors of the community. The one missing relationship was with alcohol merchants, a sector of the community crucial in limiting youth access to alcohol. Team members vary substantially in terms of age, education and the length of time they have resided in their community. Most team members were recruited by the CMCA or CTI organizer in their One ME community and about half of the members report trying to recruit new members themselves. Overall, they feel informed about the activities and plans of their strategy teams, feel that they have influence over the decisions made and have positive perceptions about the abilities of their teams. Few obstacles appear to be hindering the internal operation of the teams, but members perceive a number of obstacles to the teams in the community. These obstacles include the desire of the community for no new alcohol restrictions, the belief that underage drinking is not a problem and personal conflicts amongst community decision makers. Despite the obstacles, team members are optimistic about the continued work in their communities.

The environmental approaches being implemented in Maine cover the spectrum of strategies. Across the state, coalitions are engaged in the four types of strategies: community mobilization and information dissemination, policy change, enforcement of alcohol laws and policies and limiting youth access to alcohol. All coalitions have either formed strategy teams or are in the process of developing those teams to lead the efforts in their communities.

Of the 23 coalition coordinators, all but one completed an assessment regarding their coalitions. More than half of coalition coordinators (55%) live in the community that they serve and work full-time (55%). Nearly 40 percent have worked in the substance abuse prevention field for at least three years. Coalition coordinators are well educated, with just under half (46%) reporting a master's degree or higher. About 82 percent of coalitions report at least one full-time staff person.

Members are fairly active. Coalition coordinators report that two thirds of coalition members attend most of the meetings and the remaining third attend some of the meetings.

As shown in the graph below, most coalitions meet basic requirements for formalization: 95 percent use agendas; 91 percent take minutes during meetings; 91 percent have mailing lists; 86 percent have a mission statement; and 86 percent hold meetings on a regular date and time.

Activity	Percent
Provide written agendas at meetings	95%
Provide mailing list	91%
Record meeting minutes	91%
Have a mission statement	86%
Hold meetings on regular date/ time	86%
Distribute minutes	77%
Have an organizational chart	73%
Have written procedures for decision-making	59%
Provide description of staff / leader responsibilities	45%
Provide reorientation to members periodically	45%
Provide standard orientation	41%
Have written by-laws	36%
Provide written membership policies	32%
Provide written policy for member rotation	27%
Have written expectations for members	23%
Have written procedures on leader selection	23%

Representation of community sectors on the coalitions is diverse. Members represent the school systems (95%), the health care sector (86%), private-nonprofit health or social services providers (77%), grassroots community organizations (73%), parents (73%), local prevention agency staff (68%) and law enforcement (64%).

Almost all coalition coordinators are satisfied with the diversity of skills and resources of coalition members (82%) and the representation of various community sectors on their coalitions (64%).

About half of the coalitions (46%) are implementing one or two model prevention programs or strategies, 23 percent are implementing three, and 32 percent are implementing four or more. The five most commonly implemented prevention programs are Communities Mobilizing for Change on Alcohol (CMCA) (9 coalitions), Parenting Wisely (7 coalitions), Guiding Good Choices (GGC) (6 coalitions), STARS (5 coalitions) and All Stars (4 coalitions). Coalition coordinators were asked about

how and why they selected specific model programs. Across the five programs most commonly implemented, the main reasons for choosing these programs are because they meet community needs (84%), address risk factors that are high in the community (74%), and are easy to adapt to meet local needs (65%). By program, the reasons were similar. Of those coalitions implementing each program, meeting community needs is the most common reason for selecting CMCA (78%), Parenting Wisely (100%), and GGC (100%). For STARS, the most common reason is that it addresses risk factors high in the community (80%). Coalitions that implement All Stars reported they chose the program because it not only addresses risk factors that are high in the community (100%) but it also is compatible with their current prevention philosophy (100%). The table below shows the factors that influenced the selection of model prevention programs.

Factors	CMCA	PW	ALL STARS	GGC	STARS
Meets community needs	77.8%	100.0%	75.0%	100.0%	60.0%
Addresses risk factors that are high in the community	55.6%	71.4%	100.0%	83.3%	80.0%
Easy to adapt	77.8%	71.4%	75.0%	50.0%	40.0%
Recommended by others	44.4%	57.1%	50.0%	66.7%	60.0%
Compatible with coalition's prevention philosophy	33.3%	57.1%	100.0%	66.7%	40.0%
Affordable	55.6%	42.9%	75.0%	50.0%	40.0%
Easy to stop if not working	11.1%	42.9%	0.0%	50.0%	40.0%
Easy to implement	22.2%	42.9%	50.0%	16.7%	20.0%
Easy to obtain	66.7%	28.6%	50.0%	33.3%	20.0%
Used by others in the community	0.0%	14.3%	0.0%	0.0%	0.0%

More than half of coalition coordinators perceive their One ME coalition to be somewhat effective and a quarter perceive their coalitions to be very effective. More than half of coalition coordinators rate their coalition as very effective in increasing communication and networking (59%) and in increasing collaboration and cooperation (59%). Thirty-six percent believe they are very effective in creating a comprehensive and integrated prevention plan for the target community and 32 percent believe they are very effective in providing new funds to the community for prevention activities. Only one quarter rate themselves as successful in reducing "turf" issues among community agencies and only 14 percent believe they are very effective in finding new resources to continue coalition activities.

Technical assistance needs are commonly recognized. Coalition coordinators want technical assistance in the evaluation of program activities (91%), development of an action plan (82%), planning for maintenance and institutionalization of prevention programs over the long term (82%), building the coalition's organizational capacity (77%), building knowledge and skills of members (77%), and monitoring activities to make changes in current actions or decide on changes in future activities (73%). The chart below shows the full array of technical assistance requested by coordinators.

Activity	Percent
Evaluating Activities	91%
Developing Action Plans	82%
Planning for maintenance of programs	82%
Building Skills and Knowledge of Members	77%
Building Organizational Capacity	77%
Monitoring Activities	73%
Implementing Activities	64%
Organizing and Structuring Groups	50%
Recruiting New Members	45%
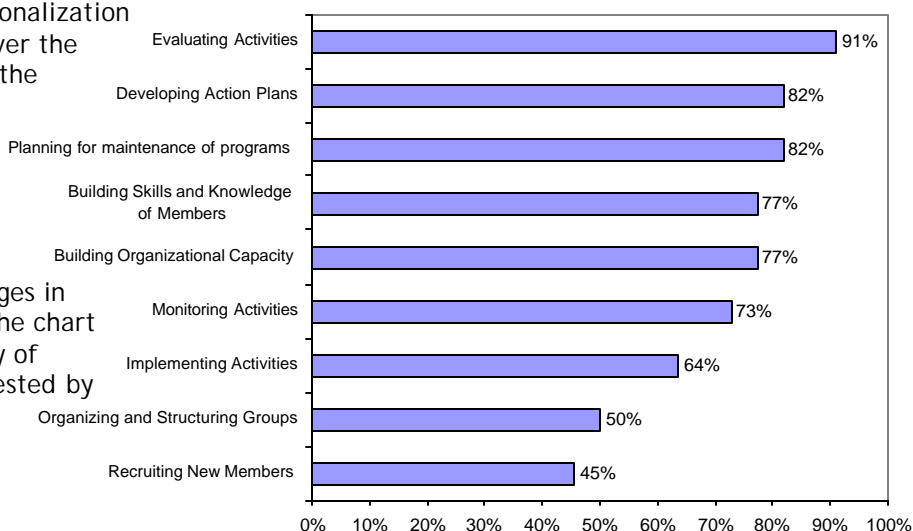
Two hundred and twenty-four coalition members, or 62 percent of all members, completed a mailed survey describing their experience within their community coalition. Over half of the members (54%) report attending *most* coalition meetings; 19 percent attend all meetings and just over ten percent attend at least some meetings. Only 17 percent attend meetings just "because it is a part of my job." Most contribute to meetings (91%), serve on councils (69%), work for the coalition outside of meetings (60%), and help organize activities other than meetings (52%). A smaller proportion serve in a leadership role (41%), direct a particular program's implementation (31%), or serve in a paid capacity as a coalition staff member (9%). The majority of members are satisfied with the diversity of member skills and resources (72%) and the representation of various community sectors on their coalition (66%).
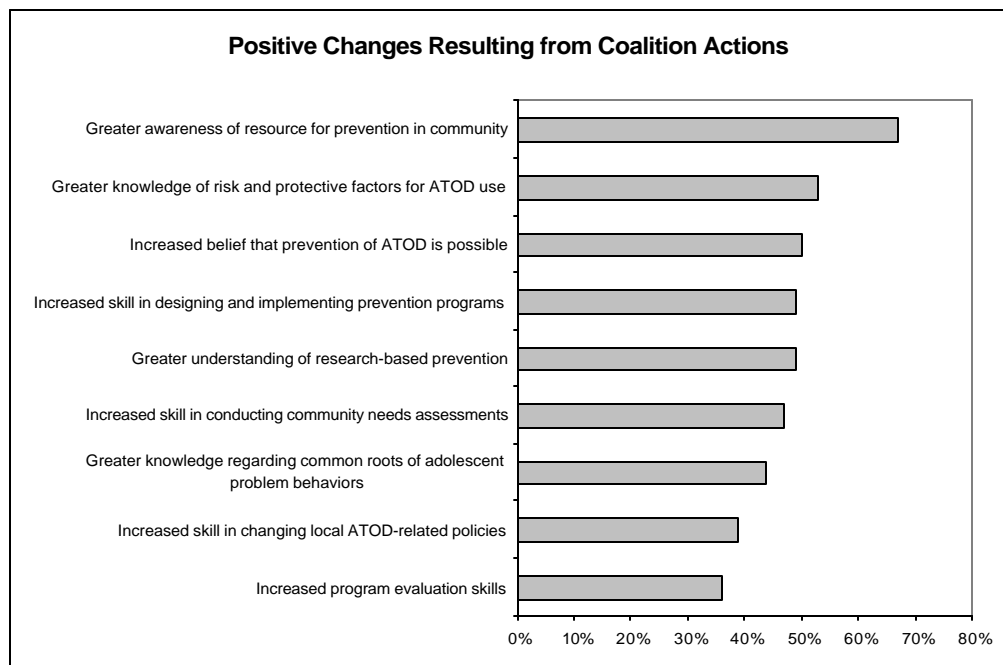
Most members are satisfied with the performance of the coalition. The majority report:

- They really care about the future of the coalition (91%);
- Have a voice in what the coalition decides (86%);
- Feel a strong sense of loyalty to the coalition (79%); and
- Are satisfied with how the coalition operates (77%).

Coalition members report positive changes resulting from coalition actions including:

- Increased awareness of resources for prevention programming in the community;
- Knowledge about risk and protective factors for substance use;
- The belief that prevention of ATOD problems is possible;
- Skills in implementing prevention programs; and
- Understanding of research-based prevention.

The graph at right shows the positive changes that resulted from participating in a One ME coalition.

Positive Changes Resulting from Coalition Actions

Category	Percentage
Greater awareness of resource for prevention in community	~67%
Greater knowledge of risk and protective factors for ATOD use	~53%
Increased belief that prevention of ATOD is possible	~50%
Increased skill in designing and implementing prevention programs	~49%
Greater understanding of research-based prevention	~49%
Increased skill in conducting community needs assessments	~47%
Greater knowledge regarding common roots of adolescent problem behaviors	~44%
Increased skill in changing local ATOD-related policies	~39%
Increased program evaluation skills	~36%

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The cohesion of the coalitions is highly rated. Most respondents (87%) report that members have a shared understanding of the problems that the coalition is designed to address and almost all report that members agree with the coalition's mission (89%) and believe that the coalition's discussions have resulted in action (86%).

Coalition members report low conflict within their coalitions. When conflict occurs, it tends to revolve around the inability of members to make commitments (54%), differences of opinion about the best approach (45%), personality clashes (30%), and disagreements about division of labor and the coalition's work process (28%). Open debate was the most commonly used method to address conflict (68%), followed by negotiation (39%) and voting (31%). Most members agree that decision making is fair (75%) and timely (71%).

Two thirds of coalition members feel their coalition is somewhat or very effective. More than half of members believe that the work of their coalition has resulted in the following:

- Expansion/strengthening of community ATOD prevention activities;

- Increased coordination among local ATOD-related organizations;

- More prevention resources;

- Increased leveraging of prevention resources;

- Improved collaboration among local organizations;

- Improved information exchange;

- Increased ATOD-related media coverage;

- Improved ATOD-related policies; and

- A comprehensive community prevention plan.

From the perspective of One ME coalition members, the most common barriers facing coalitions are denial and apathy in the community toward substance abuse problems (63%), lack of community awareness of substance abuse problems (50%), and lack of resources for substance abuse prevention (49%). Coalition leaders are highly rated: 91 percent agreed that leaders are competent, 90 percent agree that leaders have a clear vision, 88 percent agree that the leader is well respected by members, and 87 percent agree that the leader can "get things done.

Between July 2003 and June 2004, *One ME Model Program Training Surveys* were sent to One ME coalition members and facilitators who participated in trainings offered by the developers of model programs. The purpose of the survey is to assess perceptions of the effectiveness and quality of the trainings. The survey is one of the process measures being used by the One ME evaluation team because the results may help later to explain program outcomes. One hundred forty-two trainees representing 18 One ME coalitions[1] responded to the survey for an overall response rate of 66 percent.
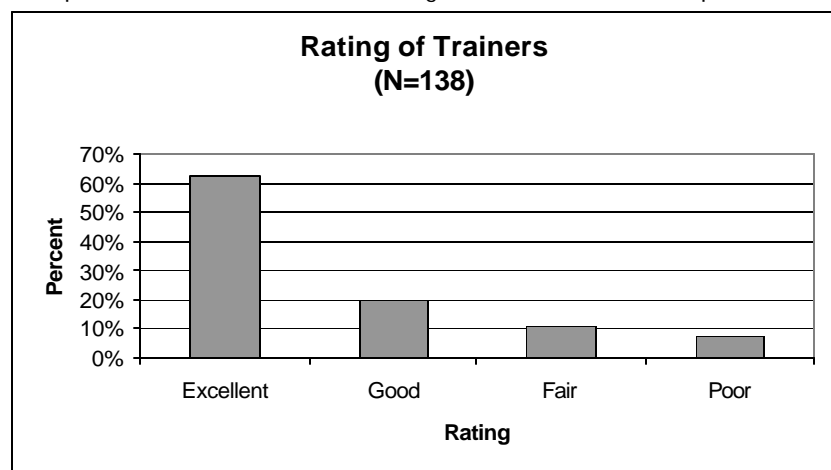
Developers of 15 of the 24 model programs selected for implementation in One ME communities provided trainings. The Olweus Bullying Prevention Program training was attended by the largest number of people (19). As shown in the table, Parenting Wisely, Communities Mobilizing for Change on Alcohol, All Stars, Guiding Good Choices and Lion's Quest trainings all had ten or more attendees.

Model Program	Number Attending
Olweus Bullying Prevention Program	19
Parenting Wisely	17
Communities Mobilizing for Change on Alcohol	16
All Stars	12
Families that Care - Guiding Good Choices	10
Lion's Quest	10
Class Action	9
Leadership and Resiliency Program	8
Reconnecting Youth	8
Second Step	8
STARS for Families	7
Not specified	6
Across Ages	3
Creating Lasting Family Connections	3
LifeSkills Training	3
Positive Action	3
Total	*142*

Quality of Training

Overall, the trainings were rated favorably. Three quarters of the attendees indicated that they would recommend the respective training to others. Ten percent said they *may* recommend it, while 11 percent would *not* recommend the training. Almost all of the survey respondents (91%) felt the trainings were well-organized. Eighty-three percent of the trainees gave the training materials high ratings.

The trainers received positive ratings, with two-thirds of the attendees rating them as "excellent." As shown in the graph at right, just seven percent of the attendees thought the trainers were "poor." All but 13 attendees indicated that the trainers were knowledgeable about their respective model programs.

Rating of Trainers (N=138)

[Bar chart showing Percent on the y-axis (0% to 70%) and Rating on the x-axis with four categories: Excellent (~63%), Good (~20%), Fair (~10%), Poor (~7%)]

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[1] Eighteen surveys were returned without the coalition name included.

Effectiveness of Training

Over half of the trainees (56%) indicated that the training they attended increased their knowledge of prevention either "a lot" or "somewhat." Twenty percent reported no increase in knowledge about prevention.

**Increase in Knowledge about
Substance Abuse Prevention
(N=137)**
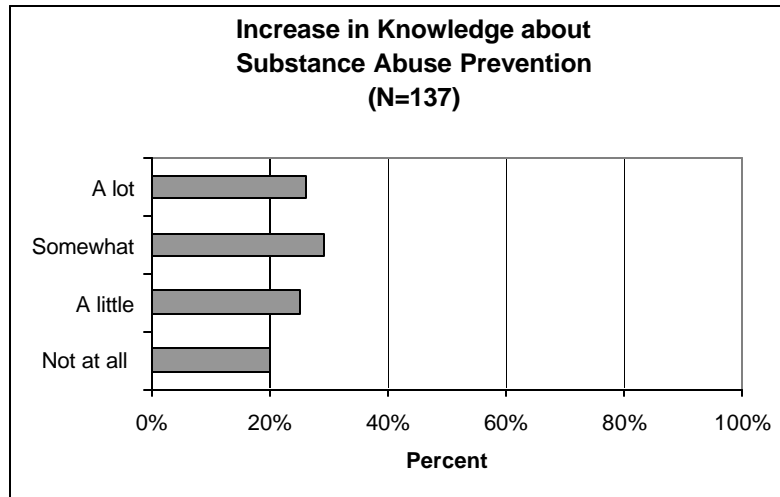
Attendance at training increased the perceived effectiveness of the model programs. Prior to training, just over half of the attendees (57%) thought the program would be effective. Following training nearly 90 percent thought it would be effective.

**Perceived Effectiveness of Model Program
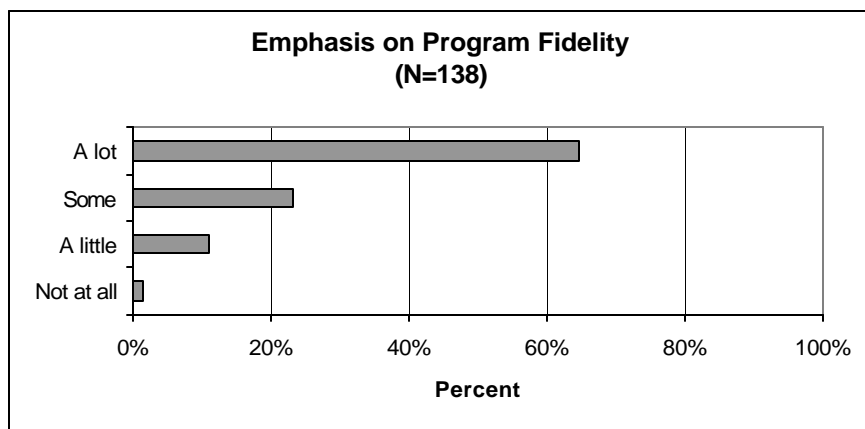Before and After Attending Training
(N=138)**
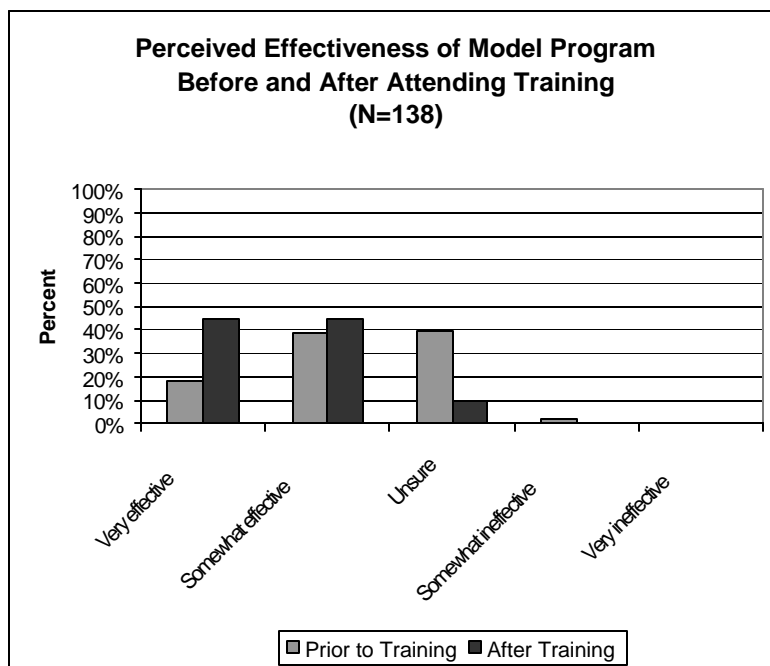
Another measure of training effectiveness is the extent to which people feel prepared to implement the model program after training. Overwhelmingly (92%), those attending model program training felt

prepared to implement the program. Just seven of 137 trainees indicated that they were either "somewhat" or "very unprepared" to deliver programming after being trained.

Emphasis on Fidelity

Fidelity is the extent to which facilitators follow the program curriculum or guidelines when implementing a program. Because model programs have been implemented and evaluated and have produced consistent, positive and replicable results, adaptation may diminish the effectiveness of the programs. For this reason, it is important that trainers stress the significance of fidelity to their models. Those attending the trainings were asked to indicate how much emphasis was placed

Emphasis on Program Fidelity
(N=138)

A lot
Some
A little
Not at all

0%   20%   40%   60%   80%   100%

Percent

on fidelity by the trainer. As shown in the following graph, two-thirds of the trainees said that the trainers placed "a lot" of emphasis on fidelity.

Individual Model Program Trainings

The following programs received overwhelmingly positive ratings:

- All Stars
- Communities Mobilizing for Change on Alcohol
- Creating Lasting Family Connections
- Guiding Good Choices
- LifeSkills Training
- Lion's Quest
- Reconnecting Youth

Class Action, Parenting Wisely, Positive Action and Second Step were rated least favorably among all of the trainings.

Whether or not trainees would recommend that others attend a similar training is one indicator of the quality of training provided. In the case of five of the model program trainings, all attendees said they would recommend the training to others. Those five programs are as follows:

- Across Ages
- All Stars
- Creating Lasting Family Connections
- Guiding Good Choices
- Reconnecting Youth

Class Action was the only training that none of the attendees would recommend to others.

Appendix A includes the *Model Program Training Survey* results by for the following model programs.

- Across Ages
- All Stars
- Class Action
- Communities Mobilizing for Change on Alcohol (CMCA)
- Creating Lasting Family Connections
- Guiding Good Choices
- Leadership and Resiliency Program
- LifeSkills Training
- Lion's Quest
- Olweus Bullying Prevention Program
- Parenting Wisely
- Positive Action
- Reconnecting Youth
- Second Step
- STARS for Families

The tables show the extent to which trainees knowledge increased as a result of the training; their preparedness to implement the program; trainees' perceptions of the effectiveness of the model program before and after training; the quality of the trainers and the training materials; and whether or not they would recommend the training to others.

Fidelity of Implementation

One of the critical aspects of One ME is for each coalition to deliver programs consistent with models which have been tested elsewhere. The replication of programs with a high level of fidelity increases the likelihood of success based on evidence of prior effectiveness. On the other hand, strict replication has potential disadvantages, such as, the program's design not meeting the needs of a particular coalition's target population, the program not having been designed for the same conditions that exist in the coalition's service area and the program requiring more resources than are available to a coalition. To minimize these potential challenges, One ME required coalitions to carefully select Center for Substance Abuse Prevention (CSAP) models that fit best with local needs and resources.

The term "fidelity" is used to assess the fit between the program that is actually delivered and the program as it has been designed. Dumas, Lynch, Laughlin, Smith, and Prinz (2001) define fidelity as a demonstration that all program components are delivered in a consistent manner to participants with adherence to the theoretical foundation of the intervention. Two types of fidelity are integral to program success: process and content. Process fidelity pertains to the manner in which the intervention is delivered whereas content fidelity ensures that all of the contents of the intervention are delivered in the same way to all participants. Both the process and the content should reflect the original design of the program which is being replicated.

Interventions can be hampered when care is not taken to understand the program's protocol and core components and to fully implement the intervention comparably for all participants. This lack of consistency in implementation may result in a poor outcome, suggesting that a particular program does not work. When this happens evaluators need to know whether the reason is that the program has not been implemented according to the model or whether other factors are at play. In an effort to assess fidelity, the One ME Evaluation Team developed the *Program Implementation Checklist*. The *Checklist* is one way for evaluators to document program fidelity. It is completed by program facilitators at the end of each program cycle to gain an understanding of how programs are implemented.

In the first year of One ME program delivery, 38 *Program Implementation Checklists* were received from 12 One ME coalitions. The table below shows the number of *Checklists* completed. Nearly one-third of the *Checklists* received by evaluators are from Class Action.

Program Implementation Checklists Received by Program		
Model Program	**Number**	**Percent of Total**
Class Action	12	31.6%
All Stars	6	15.8%
Guiding Good Choices	5	13.2%
Creating Lasting Family Connections	4	10.5%
Parenting Wisely	4	10.5%
Project Toward No Drug Abuse	2	5.3%
LifeSkills Training	2	5.3%
Leadership and Resiliency Program	1	2.6%
Project ALERT	1	2.6%
STARS for families	1	2.6%
Total	*38*	*100.0%*

One ME Adaptations

Ideally, One ME coalitions would implement their model programs with complete fidelity. While this is ultimately the goal when implementing research-based prevention programs, it is in many cases unrealistic. Local circumstances very often necessitate changes to program components to make program delivery feasible. These changes or adaptations can be deliberate or accidental. Adaptations can include:

- deletions or additions of program components;

- modifications to program components;

- changes in intensity of the administration of program components; and

- cultural or other modifications required by local circumstances.[2]

The following table shows the program components that differed from the original design of the model programs in the first year of One ME implementation. The most frequently adapted program components include session frequency (49%), length of sessions (45%) and the number of sessions (34%). The order of sessions, use of materials, program setting and intended population were modified least often.

Did delivery of the model program differ from the original design in terms of...?

	Number of sessions	Length of sessions	Session frequency	Order of sessions	Content of sessions	Use of materials	Setting	Intended population	Instructor to participant ratio
Yes	34%	45%	49%	5%	26%	5%	5%	5%	26%
No	66%	55%	51%	95%	74%	95%	92%	95%	68%
N/A	0%	0%	0%	0%	0%	0%	3%	0%	5%

☐ Yes ■ No ◨ N/A

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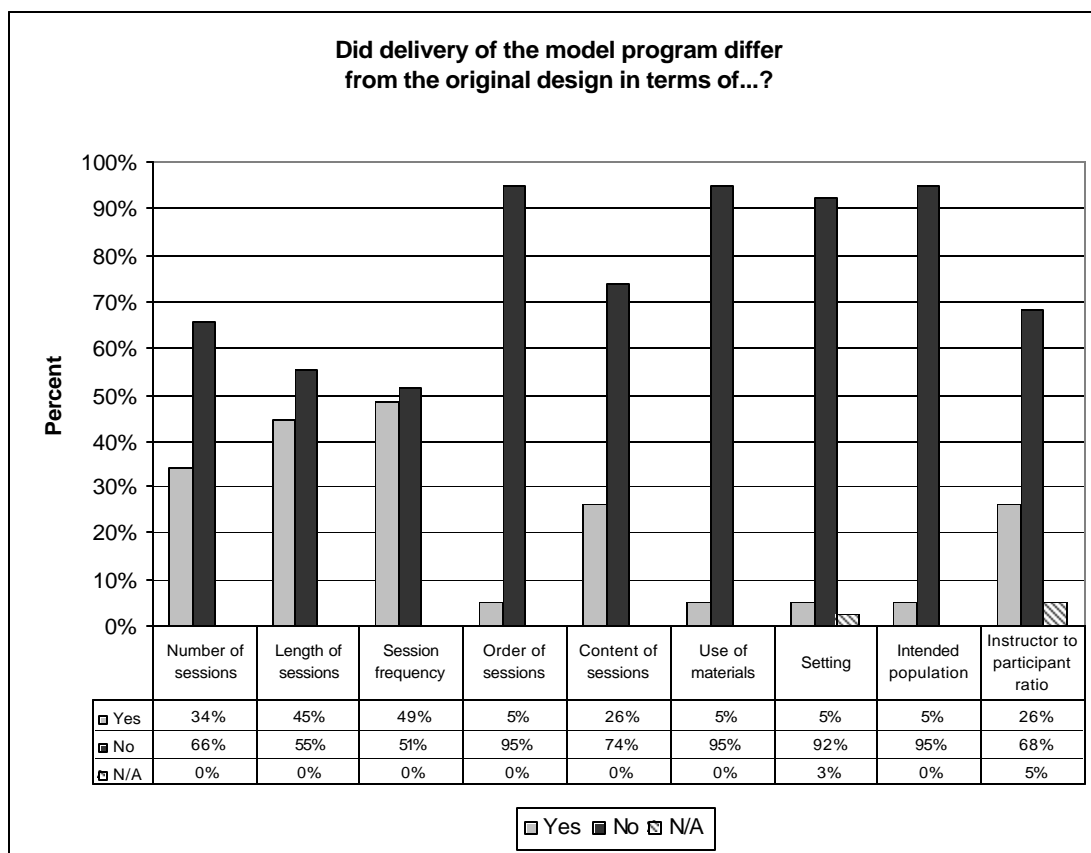
[2] Program Fidelity and Adaptation in Substance Abuse Prevention, 2002 Conference Edition.

Number and Length of Sessions and Session Frequency

One-third of the programs differed from the original design of the model programs in the number of sessions delivered. Just under half of the facilitators (45%) reported modifying the length of the sessions and half of the *Checklists* (49%) indicated that changes were made to the frequency with which programs were delivered.

The most common adaptation was reducing the total number of sessions because the length of class periods in some schools is twice the time allotted to program delivery by the program developer. Many facilitators reported delivering two lessons in one class period. A directly related adaptation was a reduction in the length of the program cycle. In other cases, the number of sessions was increased and the length of the program cycle was extended. These changes were made to give program participants more time for discussion of issues, to allow students who missed classes to be brought up to speed and to cover all of the material. Below are all of the adaptations noted by facilitators in relation to the number, length and frequency of sessions.

Changes in intensity of program administration:

- Reduced the number of total sessions by delivering two lessons in one class period (16 programs)
  o Class periods are 80 to 90 minutes; some programs are intended to be delivered in 45-60 minute sessions.
- Decreased the length of the program cycle (e.g., delivered a multi-week program over a four-day period of time) (7 programs)
- Increased the number of sessions (5 programs)
  o This allowed participants time to discuss issues more thoroughly.
  o The extra sessions allowed for the completion all the lessons.
  o Participants who missed sessions were able to catch up.
- Increased the length of the program cycle (e.g., delivered a nine week program over 12 weeks) (3 programs)
- Added more time per session (2 programs)
  o The added time allowed participants more time for discussion and the program did not appear rushed.
  o The additional time enabled the facilitator to acclimate to curriculum.
- Shortened lessons (1 program)
  o Because of low numbers of participants, there was reluctance to role play. Lessons were shorter because of this.
  o There was not enough time allotted per class period.

Addition of program components:

- Added sessions to accommodate guest speakers and the showing of videos (1 program)

Order of Sessions

Just two of the 38 *Checklists* indicated that the order of sessions was modified. One of the facilitators noted that the program developer was consulted prior to making a change to the order of the sessions.

Content of Sessions

One-quarter of the facilitators report modifying the content of the program sessions. Almost all of the changes to content noted by facilitators were omissions of certain components; one noted that components were added to enhance the program.

Deletion of program components:

- Omitted one case study (4)
- Shortened the first session to accommodate the pre-test (2 programs)
- Did not complete a role playing exercise because of time constraints (2)
- Did not complete role playing because of participants' discomfort with the exercise (1 program)
- Omitted parts of lessons to allow for more discussion (1 program)

Addition of program components:

- Supplemented material with videos and speakers (1 program)

Use of materials

The delivery of two programs included changes to the materials provided by the developers. In one case, the developer's evaluation tools were not used because of the amount of time they would have required. The other modification was the use of various art media to enhance one of the activities.

Setting

Two facilitators of an after-school program noted that rather than hold a particular model program in a school setting, they located it at a business within the community. This allowed participants expelled from school to take part in the course and the location is thought to be a better physical environment for the program.

Intended Population

Certain model programs are designed for at-risk youth. One facilitator reported that there were fewer high risk students who attended the program than was initially expected. Another noted that for the pilot implementation the students were not at-risk youth.

Instructor to Participant Ratio

A quarter of the facilitators (26%) reported that the instructor-participant ratio differed from the original design of the model program; some had more participants than expected and some reported having too many facilitators for the number of participants.

Nearly half of the facilitators (46%) felt that the adaptations made to their program improved it in some way. The improvements noted include the following:

- Holding longer sessions allowed for more interaction, connection and processing among participants (4 programs)

- Shortening segments of the program allowed more time for discussion (2 programs)

- Supplementing the program with videos and guest speakers enhanced it (1 program)

- Instructing students to make case scenarios applicable to Maine and their town improved the program (1 program)

- Combining the model program with a non-model program made it more attractive and palatable (1 program)

Seventeen facilitators indicated that they received guidance about the adaptations. The table to the right shows the person(s) providing guidance on modifications. Six facilitators said that they did not receive guidance about making adaptations to program delivery.

Who provided guidance about changes?	
	Number
Coalition Coordinator	12
OSA or One ME Staff	1
Program developer	1
Coalition	1
School Health Coordinator	1
Other people who have delivered program	1
Evaluation team	0
Northeast CAPT	0
Total	*17*

Experience of Program Facilitators

It is important for program facilitators to understand the model programs' curricula and core components. Without this understanding it would be difficult to implement with fidelity. Thirty of the facilitators (79%) had attended training for the model program they delivered; seven had not been to training.

In addition to model program training, facilitators were asked about their experience with substance abuse prevention, the delivery of prevention programs and teaching. Half of all facilitators are relatively new to delivering prevention programs and about one-third have less than one year of experience in substance abuse prevention, 25 of 34 facilitators have more than three years of teaching experience.

Feedback Provided to Facilitators

Feedback is an important part of the implementation and evaluation the One ME model programs. While it is the job of the evaluation team to provide feedback on program implementation, it is also important that coalition coordinators and others provide feedback periodically as part of program improvement. Evaluators have the opportunity to observe programs twice annually, but are not able to

see each and every One ME program. For this reason, it is helpful for coordinators, school personnel or coalition members to visit the programs periodically and offer suggestions for improvement.

Program observation is one way to assess fidelity of implementation by facilitators. Sixty-nine percent of the *Checklists* indicated that the facilitator had been observed

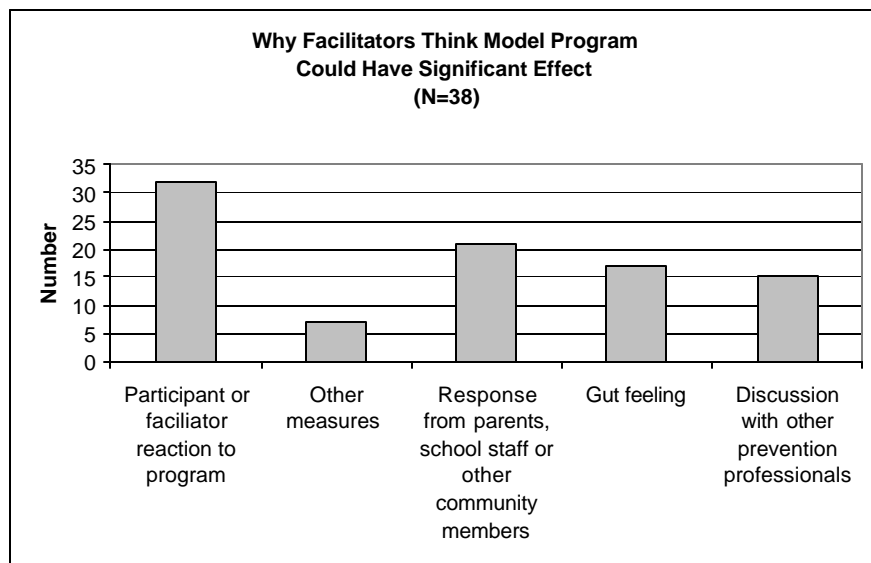**Person who Observed Program Implementation (N=15)**

implementing their program. Almost all (91%) had been observed one time. One facilitator reported having been observed two to three times; another had been observed six or more times. The majority (73%) had been observed by an evaluator as part of the semi-annual site visits. Nearly two-thirds (61%), or 22 facilitators, report having received feedback about implementation from the individuals observing the program.
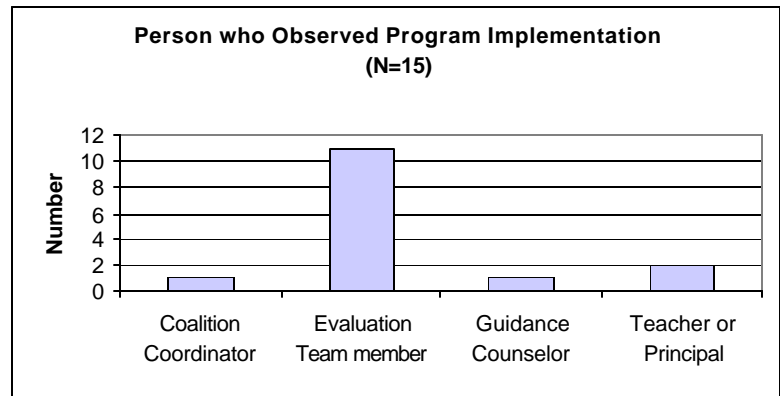
Facilitator Opinions about Model Programs

Almost all facilitators (95%) think that the model program they implemented could have a significant positive effect on its participants. Eighty-four percent base this opinion on the participants' or their own reaction to the program and just over half think the program will have a positive impact because of the response to the program by parents, school staff or other community members.

Do you think the model program implementation could have a significant positive effect on participants?		
Response	Number	Percent
Yes	36	94.7%
No	0	0.0%
Unsure	2	5.3%
Total	*38*	*100.0%*

Why Facilitators Think Model Program Could Have Significant Effect (N=38)

Given the opportunity, over half of the facilitators (21 of 38) would use the model program again. Nine indicated that it is very or somewhat unlikely they would implement the program again.

18

Likelihood of Using Model Program Again
(N=21)
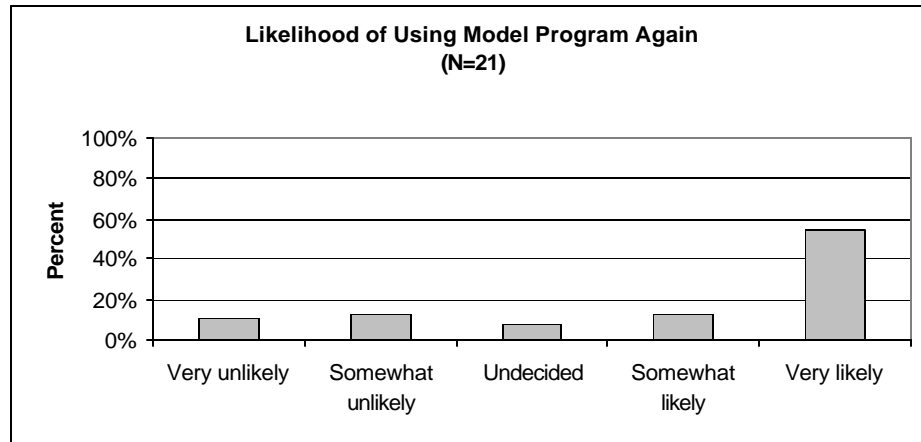
Summary

Model programs have been implemented and evaluated and have produced consistent, positive and replicable results. For this reason, a program should be implemented as close to its original design as is possible if one is to expect similar positive outcomes. While fidelity is important, CSAP and researchers in the field of prevention recognize that complete fidelity is not always possible. The One ME evaluation team is using the *Program Implementation Checklist* to assess fidelity and document adaptations.

The majority of adaptations in the first year of One ME implementation can be categorized as changes to the intensity or "dosage" of a program. Nearly one-half of the programs were delivered either in a shorter timeframe or longer timeframe than that prescribed by the model program. Over 40 percent of the programs involved some change to the length of the sessions and a third of the programs were modified in terms of the number of sessions delivered. Most of these adaptations were made to fit within established school class schedules.

A fourth of the programs had changes to the content of the program curriculum. Almost all of these changes were deletions of program components rather than additions or enhancements.

It is not surprising that a quarter of the facilitators reported that their implementation differed from the original program design in terms of the instructor to participant ratio. It is difficult to anticipate the number of participants who will actually sign-up, attend and complete a program that has never before been implemented. It is expected that the number of modifications to the facilitator-participant ratio will decrease in year two of implementation.

It is encouraging that many of the facilitators attended training for the particular program they are implementing. A greater understanding of the model program may increase the level of fidelity to it. It is equally encouraging that facilitators are receiving feedback from people observing their program delivery not only from evaluators but from coalition coordinators and school personnel.

To increase the likelihood that One ME coalitions see similar improvements in protective factors and reduction of risk factors among the population of youth targeted by One ME, continued attention to and monitoring of fidelity concerns will be important in year two of the project. As outcome data come in and are analyzed, evaluators will test the relationship of program fidelity to outcomes.

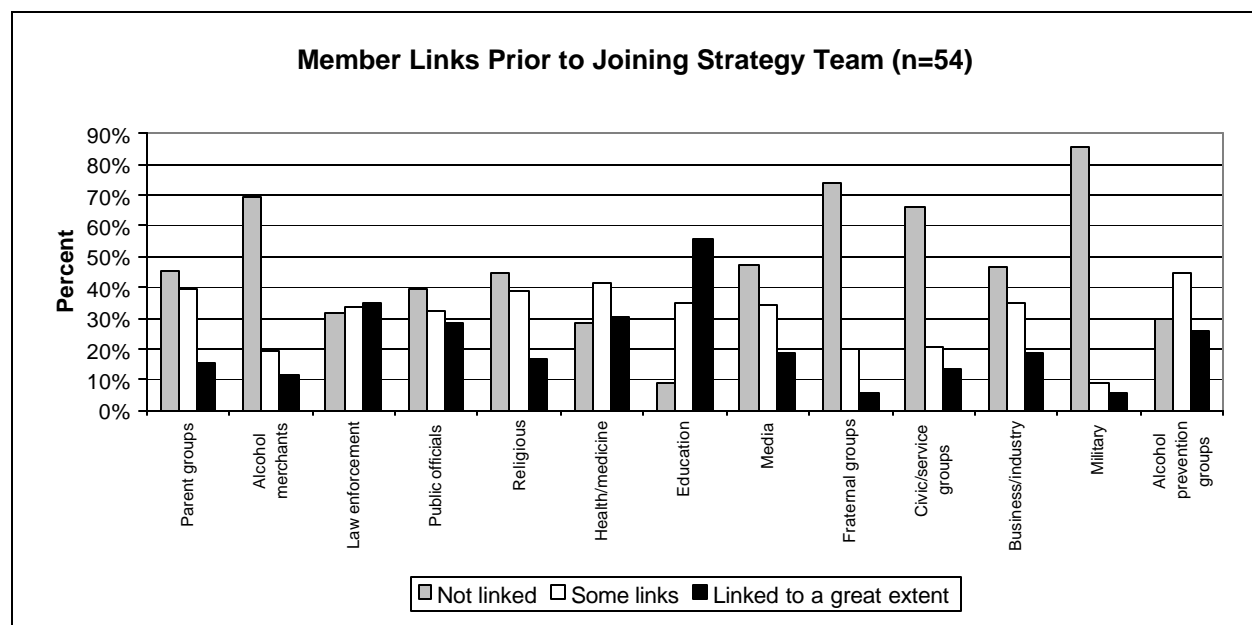**ENVIRONMENTAL STRATEGY TEAM MEMBER SURVEY**

Introduction

In May and June 2004, surveys were sent to the members of the environmental strategy teams among the 14 One ME coalitions implementing Communities Mobilizing for Change on Alcohol (CMCA) and Communities Trials Intervention to Reduce High-risk Drinking (CTI). Strategy teams are the groups of people within a community who plan for and implement one of these model strategies. One hundred twenty-four surveys were mailed to the members and 56 were returned by mid-July.

The same survey will be administered to strategy team members toward the end of the One ME project. Data from both administrations of the survey will be used to assess change and progress of the teams on a statewide basis.

The *Environmental Strategy Team Survey* was designed by the CMCA developers at the Alcohol Epidemiology Program within the School of Public Health, University of Minnesota in Minneapolis. The surveys ask members about their level of participation in team efforts, their motivations for participating, their perceptions about how the team operates and its effectiveness. It also asks for basic demographic information about strategy team members.

Who are the Strategy Team Members?

One of the goals of environmental strategies is to mobilize the community through the formation of strategy teams with diverse membership. Members identified which sectors of the community or types of organizations they had connections to prior to joining their One ME strategy team. These could be connections through jobs, membership in a group, friendships, family, neighbors or other contacts. The chart below shows the level of the members' links to certain community sectors. The gray bars show to which sectors strategy team members had no links.

**Member Links Prior to Joining Strategy Team (n=54)**

The majority of the members report no links to military, fraternal and civic/service groups or alcohol merchants. Of particular concern is the lack of connections to alcohol merchants. Many of the environmental strategies rela te to merchant practices that lead to sales to minors. The white bars in the chart show those community sectors with which team members had some connection prior to joining the CMCA or CTI effort.

More than one-third of the members report prior links with parent groups, health/medicine, education, religious groups, media, business/industry and alcohol prevention groups. The black bars represent those community sectors that team members had links with to a great extent. Prior to joining the strategy teams, more than one-quarter of the members were linked to a great extent with education, law enforcement, public officials and alcohol prevention groups.

The average age of One ME strategy team members is 44 years, with the range of ages from 18 to 64 years. Just over one-quarter (27%) have children under age 21 and just about two-thirds of the members (65%) are women.

Gender of Strategy Team Members (N=54)
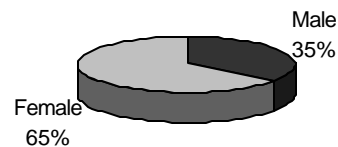
The chart below shows the education level of the members responding to the survey. Thirty-two percent report graduate degrees and 30 percent have bachelor's degrees. One-quarter have some college or technical school experience.
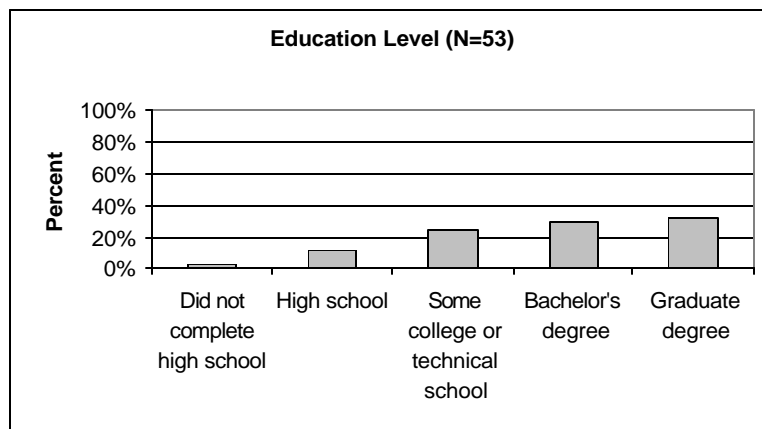
The average length of time the members have lived in their community is 22 years, with the range being from less than one year to 52 years.

Years in the Community (N=37)

	10 years or fewer	11 to 20 years	21 to 30 years	Over 30 years

.

In addition to demographic information, the survey explored the reasons that influenced people to join in the CMCA or CTI efforts in their communities.

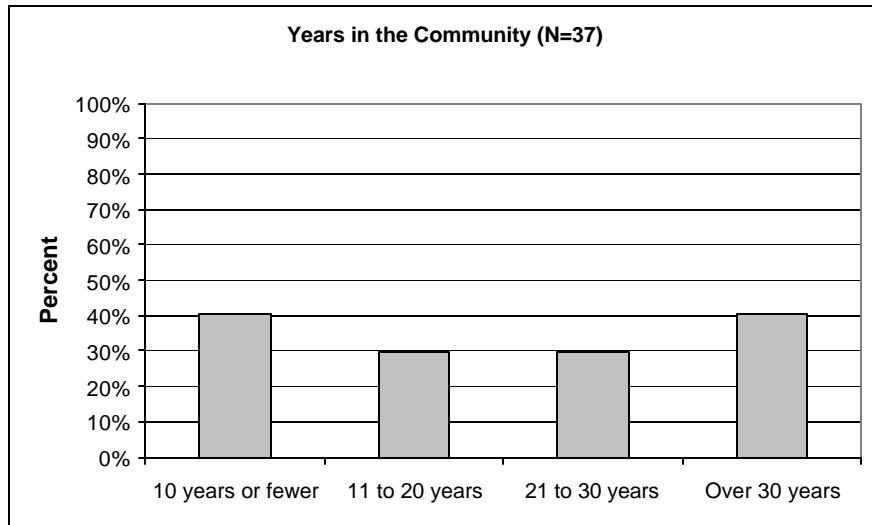- Eighty-two percent report that their concern about youth motivated them to join the team.
- Three-quarters were greatly influenced by their belief that alcohol is a problem in their community.
- More than half of the team members were greatly influenced by their belief that CMCA or CTI had the potential to be effective and their desire to contribute to the community.
- Eighty-three percent were influenced in some way to join because their work involves dealing with alcohol-related issues.

The full range of reasons influencing team members to join are shown in the table below.

Reasons that influenced members' decision to join the Strategy Team	Didn't influence decision	Influenced decision to some extent	Greatly influenced decision	Total
To contribute to community	5%	35%	**60%**	100%
Concern about youth	4%	14%	**82%**	100%
Desire to meet new people	39%	**48%**	13%	100%
Desire to learn new skills	28%	**46%**	26%	100%
My work in the community involves dealing with alcohol-related issues	17%	24%	**59%**	100%
Belief that this project has the potential to be effective	8%	34%	**58%**	100%
Someone I know has been affected by alcohol-related problems	24%	31%	**45%**	100%
Belief that alcohol is a problem in this community	4%	20%	**76%**	100%

More than half of strategy team members (57%) report being recruited by the CMCA or CTI organizer. Another 20 percent were recruited through a friend, co-worker, family member or acquaintance. The following table shows how members were recruited.

How Members Were Recruited	Number	Percent
Organizer asked me to join	31	57%
Friend, co-worker, family member or acquaintance was joining and told me about the opportunity	11	20%
I approached CMCA/CTI on my own	3	6%
A team member I did not know asked me to join	2	4%
I saw a display or table at a fair, mall or some public place	0	0%
I found out about CMCA/CTI through radio, television or the newspaper	0	0%
Other	7	13%
Total	*54*	*100%*

Strategy Team Member Participation in CMCA or CTI Activities

Over the past year, members report spending an average of 15 hours per month on CMCA or CTI activities. These activities can include strategy team meetings, reading materials about the program, making phone calls, attending presentations and writing newspaper articles. While 15 hours is the average, over 60 percent spend 10 or fewer hours each month on CMCA or CTI activities.

Time Spent on CMCA or CTI Activities over the Past Year (N=54)
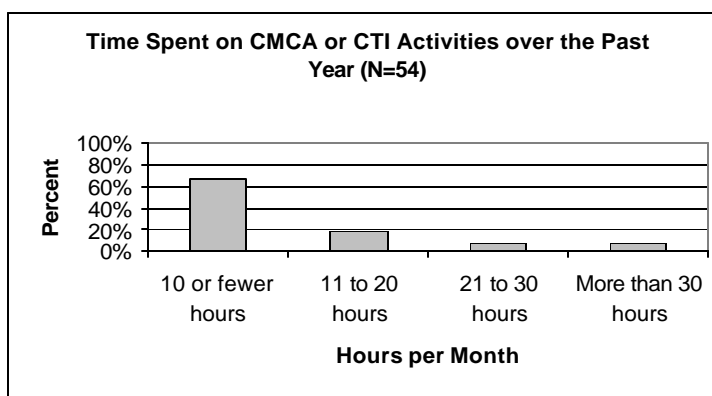
The following graphs show the activities that strategy team members engaged in and the number of times they conducted the activity. Eighty-six percent of the members talked informally three or more times with a community member about the environmental strategy they are implementing or about youth access to alcohol. Just over five percent have never done this.

Frequency with which Members Talked Informally to Another Community Member about CMCA/CTI or Youth Access to Alcohol (n=55)
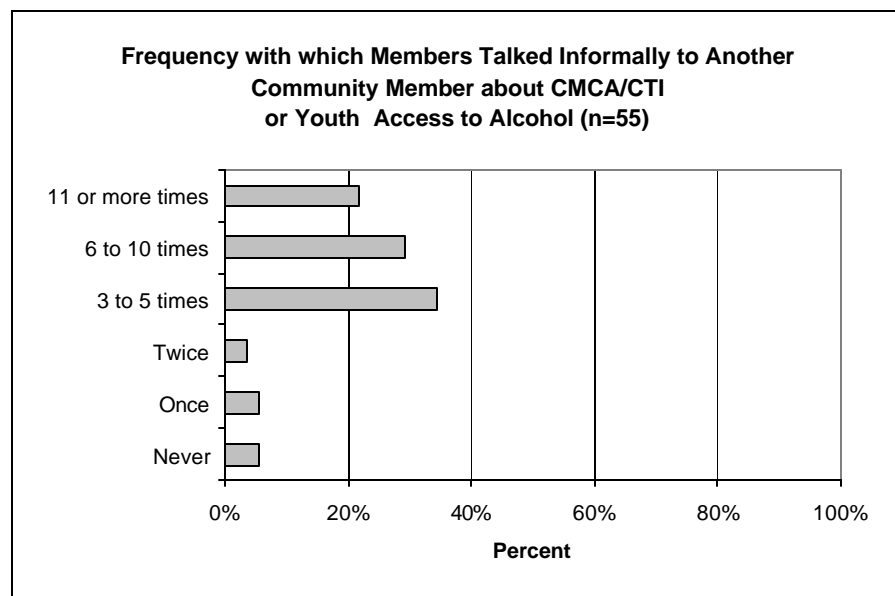
Nearly half (47%) have never participated in a formal interview about youth access to alcohol or CMCA/CTI as part of the strategy team. Of those who have, 38 percent have done it three or more times.

Member Participatation in a Formal Interview about CMCA/CTI or Youth Access to Alcohol (N=55)
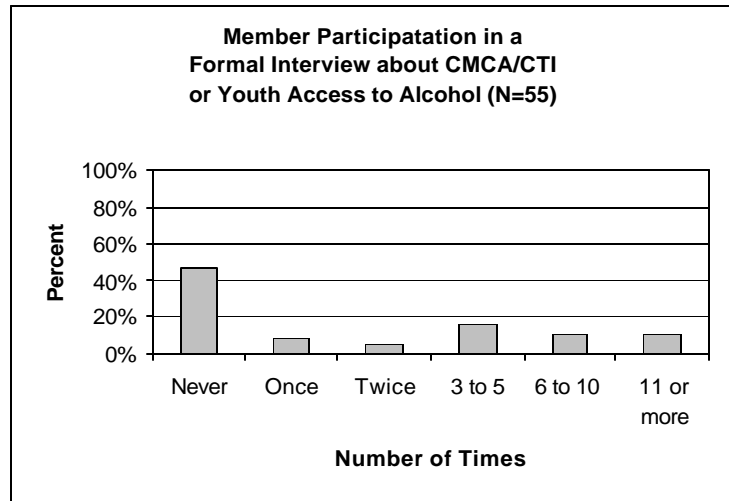
Over half (53%) of the members have participated in a presentation about CMCA or CTI; 20 percent have participated in a presentation three or more times.

Frequency with which Members Participated in a Presentation about CMCA/CTI to Another Group (N=55)
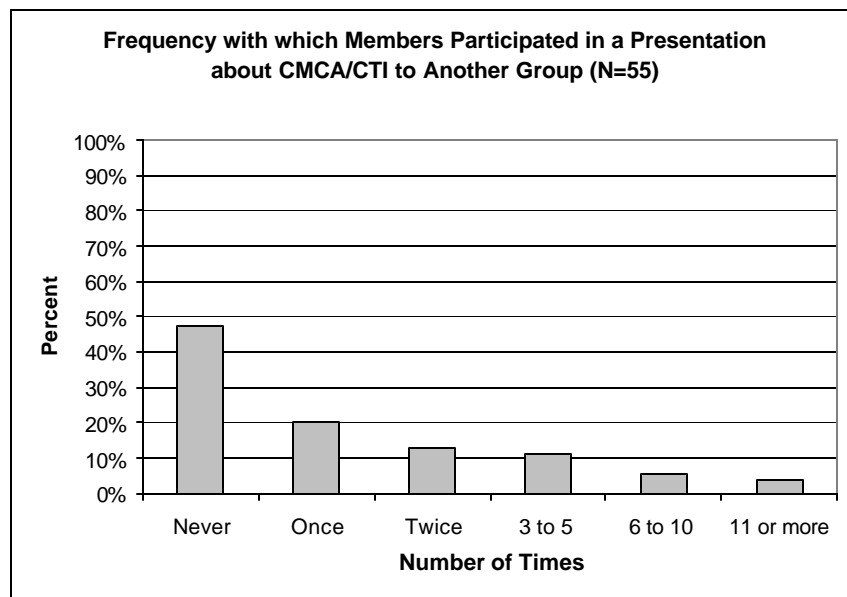
A little more than half of all the strategy team members (53%) have tried to recruit new members for the team. Over one-quarter (29%) have tried recruiting new members three or more times.

Frequency with which Members Tried to Recruit a New Member for the Strategy Team (n=55)
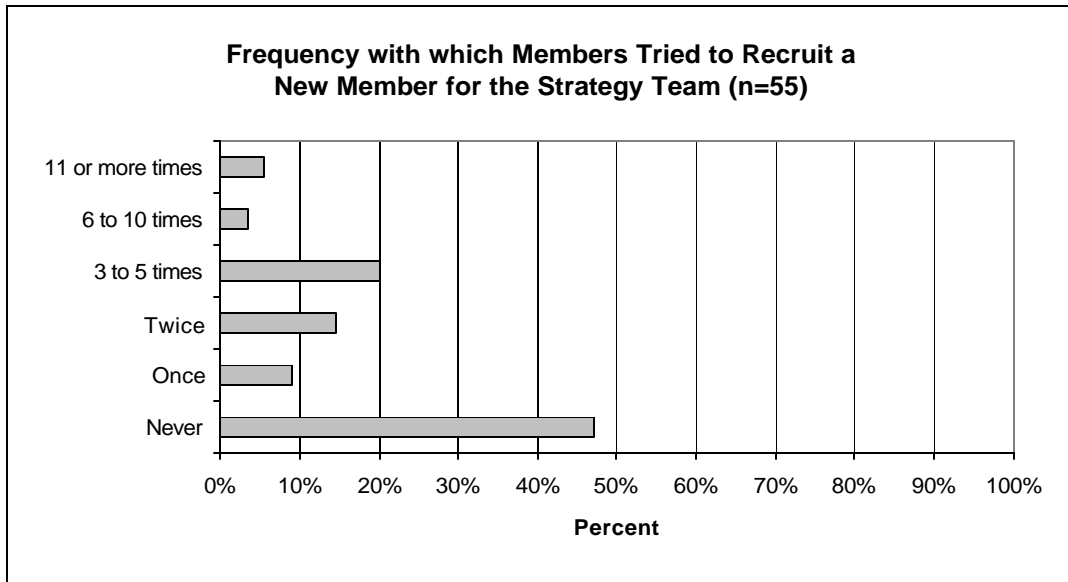
Team members were asked about other work they engaged in that was seen or done publicly in connection with CMCA or CTI.

- One-quarter of the strategy team members have written a letter to the editor about youth access to alcohol.

- Fifteen percent have written a CMCA or CTI column for a local newspaper.

- One-quarter of the members have been interviewed about the environmental strategy or youth access issues for television, radio or a newspaper.

- Over half (58%) have participated in an event sponsored by CMCA or CTI or that their strategy team took part in.

- Almost two-thirds of the members have attended meetings of a city council, school board, state legislature or other government body because an alcohol issue was being discussed.

- Thirty-five percent of the members have testified or spoken at a meeting of a government body.

- Almost half (45%) have contacted a public official to express their views on youth and alcohol.

Member Views of their Strategy Teams

As seen in the chart to the right, the majority of the members (56%) feel that they are very informed about their strategy team's activities and plans. Just one of 55 members does not feel informed.

Most members (87%) report that they have some to a lot of influence on the decisions of the strategy team.

How Informed Members Feel About CMCA/CTI Activities and Plans (N=55)

Member Perception of Their Influence on Decisions Made by the Strategy Team (n=51)
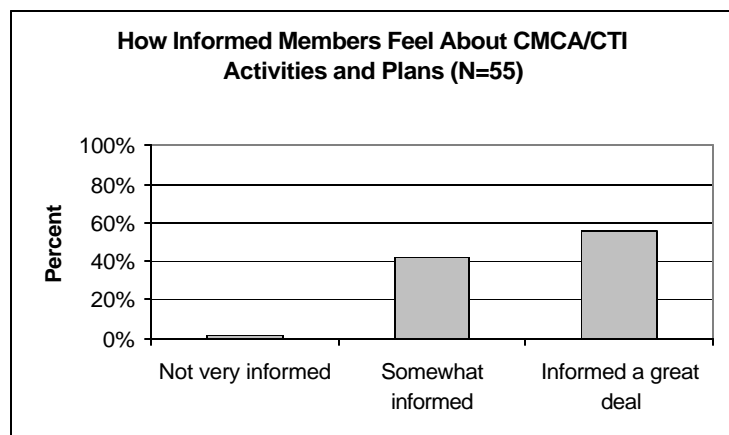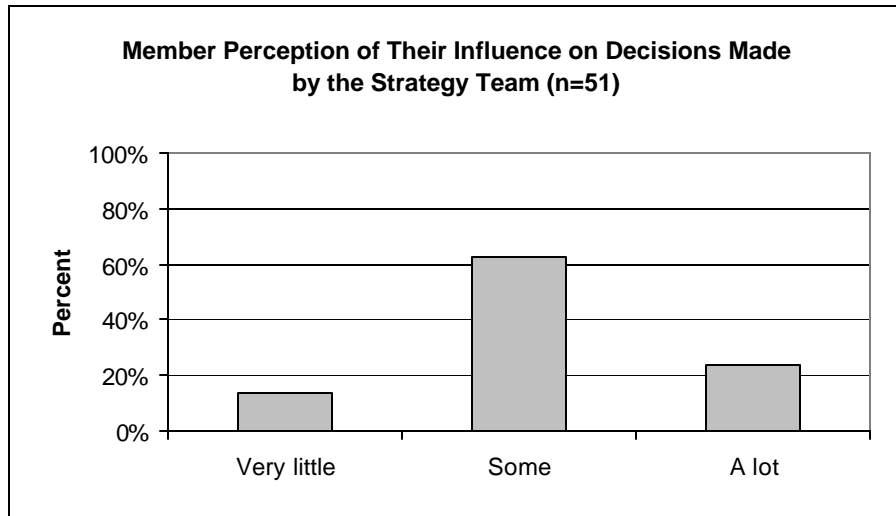
Overall, team members have positive perceptions of their strategy teams. They feel that the teams have confidence in themselves and can solve problems encountered. For the most part, members think the teams can be productive and get their work done. Members also report that their strategy teams expect to have a lot of influence. The table that follows shows the extent to which members agree with certain statements about their strategy teams.

Statement	To No Extent	To Some Extent	To a Great Extent	Total
This team has confidence in itself.	2%	**58%**	40%	100%
This team feels it can solve any problem it encounters.	6%	**75%**	19%	100%
This team believes it can be very productive.	2%	**50%**	48%	100%
This team can get a lot done when it works hard.	4%	**49%**	47%	100%
No task is too tough for this team.	6%	**68%**	26%	100%
This team expects to have a lot of influence.	6%	45%	**49%**	100%

As shown in the graph at right, most members believe that their strategy team has been somewhat to very effective at changing or enacting policies. This is probably premature, given that most teams have not yet been in operation a full year. Prevention literature suggests that these types of changes to policy take time to accomplish.

The strategy team members were asked about those issues in the community that may or may not have been obstacles

Member Perception of Strategy Team Effectiveness at Changing or Enacting Policy (n=51)
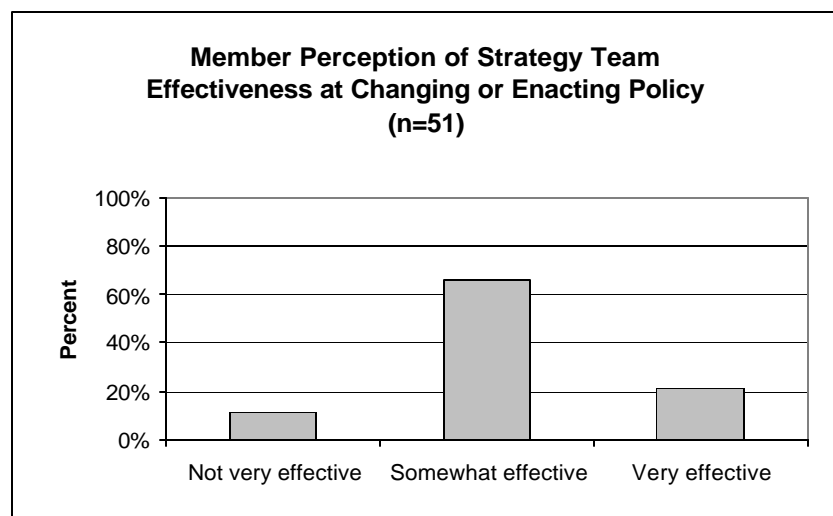
for their teams. A little more than half of the members report that their community not wanting new restrictions around alcohol was
an obstacle. Seventy percent felt another obstacle facing the strategy teams is that the community does not view underage drinking as a problem.   As shown below, over half did not feel that the personal conflicts among decision makers or the community viewing CMCA or CTI as an outside group or as a prohibitionist-type group are obstacles.

	Not an Obstacle	Issue was an Obstacle	Major Obstacle	Total
The community did not want any new restrictions around alcohol.	45%	**50%**	5%	100%
The community did not consider underage drinking to be a problem.	30%	**45%**	25%	100%
The community viewed CMCA/CTI as a prohibitionist group that wanted to stop adults from drinking, too.	**80%**	18%	2%	100%
The community felt the youth who were drinking should be held responsible instead of creating new policies that would affect adults as well as youth.	**52%**	37%	11%	100%
The community viewed CMCA/CTI as an outside group.	**68%**	25%	7%	100%
Personal conflicts between community decision makers	**56%**	33%	11%	100%

The survey also asked about obstacles *within* the strategy team. Half viewed limited resources as an obstacle. The issues that are *not* viewed as obstacles by the majority of the team members are as follows:

- Personal conflicts within the Strategy Team
- A high level of turnover among team members
- Turnover of the CMCA/CTI organizers
- Differing perspectives among team members about CMCA/CTI goals
- Limited effectiveness of the organizer in working with the team

Survey responses indicate that the existing strategy teams have appropriate formal processes in place. Almost all of the members (91%) indicate that their team has a written statement of purpose or a mission statement. Three-quarters report having written operating procedures. More than 80 percent indicate that they have formal membership lists and record keeping mechanisms such as tally sheets or meeting minutes.

The majority of the members (82%) think their strategy team will continue its work after One ME funding ends. Forty-four of 50 members report that they would continue participating on the team if it continues its work.

Summary

The results of the initial administration of the *Environmental Strategy Team Member Survey* provides a baseline look at who the members are, their level of participation and what they think about

Likelihood of Strategy Team Continuing Its Work When One ME Funding Ends (N=49)
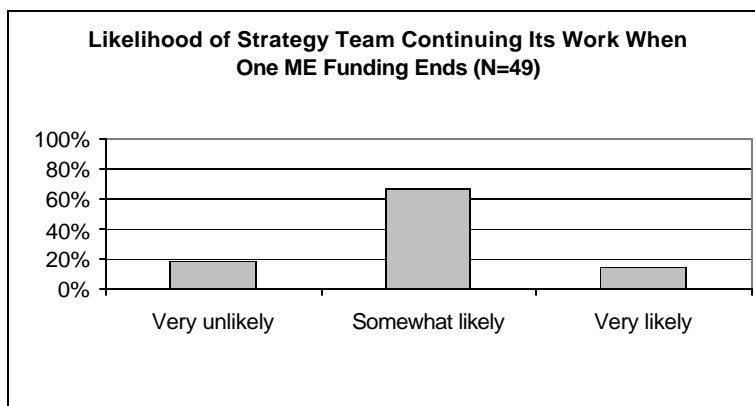
their teams' CMCA and CTI efforts. For the most part, the team members have diverse links within the community. Of concern is that few members had connections with alcohol merchants prior to joining CMCA and CTI. Merchants play a big role in youth access to alcohol and should be either a part of the teams or a partner with the teams. The members vary quite a bit in terms of age, education and the length of time they have resided in their community.

Over half of the members were recruited by the CMCA or CTI organizer in their One ME community. Almost half of the members report trying to recruit new members. In order to increase the likelihood of sustainability, it will be important moving forward that recruitment not become the responsibility of one or two people within the strategy team.

The written documents that the strategy teams have in place such as mission statements, operating procedures and record keeping mechanisms may contribute to future sustainability of One ME environmental strategies. Most of the members report having these documents and processes. Overwhelmingly members feel informed about the activities and plans of their strategy teams, feel that they have influence over the decisions made and have positive perceptions about the abilities of the strategy teams. Few obstacles appear to be hindering the internal operation of the teams thus far, but members perceive a number of obstacles to the teams in the community. These obstacles include the desire of the community for no new alcohol restrictions, the belief that underage drinking is not a problem and personal conflicts amongst community decision makers. While members identified these obstacles, they appear optimistic about the likelihood of CMCA and CTI continuing once One ME funding ends.

ENVIRONMENTAL STRATEGY ACTIVITIES

Between March and May 2004, RTI and HZA conducted interviews with the 14 One ME coalitions implementing the model environmental strategies, Communities Mobilizing for Change on Alcohol (CMCA) and Community Trials Intervention to Reduce High-risk Drinking (CTI). The purpose of the semi-annual interviews is to document coalition efforts to mobilize individuals and organizations to change their community in ways that result in a reduction in youth access to alcohol. The interviews are conducted with the leader or leaders of the effort to implement the environmental strategy. Evaluators document activities in *Environmental Strategy Activity Tables*. The tables document targeted changes, activities conducted by the coalitions and activities conducted by people or organizations outside of the coalition. As progress is made toward achieving the changes targeted, the tables, included in Appendix B, will include a column to record results. Coalition-specific tables were distributed to coalition coordinators; the following is an overview of One ME environmental strategy efforts statewide.

The efforts are organized into four categories:

1. *Community Mobilization and Information Dissemination:*
2. *Policy Change:*
3. *Enforcement of Alcohol Laws and Policies; and*
4. *Youth Access to Alcohol.*

Community Mobilization and Information Dissemination is about what coalitions and their communities have done to mobilize and educate community members about CMCA or CTI and youth alcohol issues in general. Activities conducted by One ME coalitions include: recruiting strategy team members; publishing information on CMCA or CTI; planning, mobilization and education efforts; holding one-on-one discussions; and making presentations to local organizations.

Policy Change describes changes targeted and actions taken by communities to establish or change policies or laws that affect youth access to alcohol and includes two types of policy change, institutional policies and community-instituted regulations. Institutional policies are guidelines or procedures of agencies or organizations such as schools or alcohol establishments. Community instituted regulations are rules that apply to the community as a whole. These two categorizations include targeted changes such as reducing alcohol advertising to youth in selected locations (institutional policy), revising school policies on substance use (institutional policy) and mandating Responsible Beverage Server training (community regulation). One ME activities in the Policy Change area include educating local organizations about the state of alcohol advertising in the community, working with schools to develop stricter policies and working with the District Attorney to develop a local ordinance mandating Responsible Beverage Server training.

Enforcement of Alcohol Laws and Policies includes targeted changes and activities involving the enforcement of current laws or policies. Laws and policies can be enforced not only by law enforcement, but by community members and organizations (e.g., schools). Activities aimed at increasing enforcement include coalitions educating or re-educating police on laws governing alcohol use and a school administrator writing an open letter explaining school policies on alcohol use and reminding the community of its responsibility to prevent alcohol use by minors.

Youth Access to Alcohol describes targeted changes and activities that directly prevent or reduce youth access to alcohol. Youth obtain alcohol directly from adults in the community and from employees of establishments that serve or sell alcohol; some coalitions are implementing strategies aimed at reducing the direct transfer of alcohol to youth by adults over 21 years of age. Environmental strategies also include reducing access to alcohol by decreasing the opportunities that youth have to consume alcohol (e.g., provide alternative activities). The activities conducted in the area of *Youth*

Access to Alcohol include: planning and/or mounting "Sticker Shock" campaigns that inform consumers at the point of purchase about laws concerning furnishing alcohol to minors; planning alternative activities to drinking for youth; and advertising the availability of on-line Responsible Beverage Server training.

Again, the specific One ME environmental strategy activities are shown in Appendix B. All of the One ME coalitions implementing environmental strategies are engaged in mobilization of their community and disseminating relevant information. All of the coalitions are engaged in the development of strategy teams, or the groups of people who will be planning and implementing the various strategies within each community. Nine of the 14 coalitions had a team in place by May 2004. All of the coalitions are doing work in the community to increase awareness around youth access to alcohol. The coalitions are focused on raising awareness among the following groups:

- Local government
- Law enforcement
- Schools
- Youth
- Parents
- State-level policy makers
- Other community groups

Many of the coalitions are focused on changing the policies of institutions within their communities and on initiating community regulations. Three coalitions are working to increase signage in the community outlining alcohol and tobacco use laws and also increasing signage to promote legal sales of alcohol. The changes targeted by a small number of coalitions to address community regulations include mandated Responsible Beverage Server training, reclassification of certain alcoholic beverages and review of a state law that allows minors to consume alcohol at home. One coalition is working with local law enforcement on their policy on house parties attended by youth. Six coalitions are working with schools on their policies and five coalitions are increasing communication among different community agencies to reduce underage drinking.

About half of the One ME coalitions implementing CMCA and CTI are working on the enforcement of alcohol laws and policies among the community and law enforcement agencies. The efforts which focus on enforcement among the community are targeting parents and one coalition is working on the issue of underage drinking among college students. The efforts which target law enforcement agencies include educating officers, increasing patrols, establishing targeted patrols and establishing sobriety checkpoints.

All coalitions are engaged in some way in directly addressing youth access to alcohol. Three strategies are focusing on the prevention of youth in obtaining alcohol from other youth. One strategy is aimed at decreasing shoplifting of alcohol by youth; others are providing alternative activities for youth and reducing the number of locations where young people can gather and drink alcohol. The primary strategy to prevent the distribution of alcohol by establishments is education (e.g., server training). One coalition is coordinating regular bar owner meetings with law enforcement. In working to prevent the transfer of alcohol from adults other than retailers to minors, nine coalitions report either planning a future Sticker Shock campaign or are in the midst of conducting one. Many coalitions are focusing on general public education around the issue and on education of law enforcement personnel. A small number of coalitions have begun researching the development of local ordinances.

APPENDICES

Appendix A: Model Program Training Survey Results by Program

Across Ages

To what extent did the training increase your knowledge about substance abuse prevention? (N=3)			
A lot	**Somewhat**	**A little**	**Not at all**
1	0	1	1
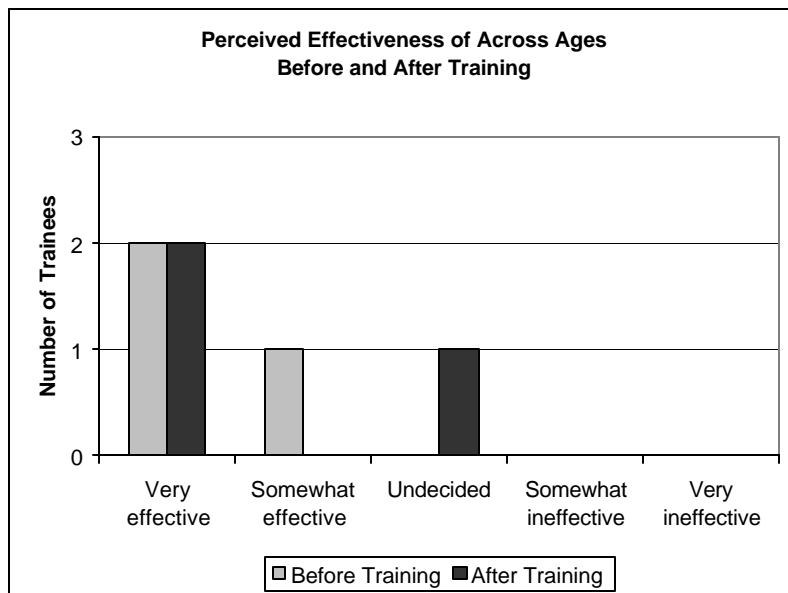
Perceived Effectiveness of Across Ages Before and After Training

How prepared do you feel to implement the program? (N=3)				
Very prepared	**Somewhat prepared**	**Undecided/ unsure**	**Somewhat unprepared**	**Very unprepared**
2	1	0	0	0

Comments about preparedness for implementation:

- I have a good understanding of program components and feel qualified and have the supports in place to implement the program effectively.

How much emphasis did the trainer place on program fidelity during training? (N=3)			
A lot	Somewhat	A little	Not at all
3	0	0	0

How organized was the training? (N=3)				
Very organized	Somewhat organized	Undecided/ unsure	Somewhat disorganized	Very disorganized
3	0	0	0	0

How would you rate the quality of the training materials? (N=3)				
Very high quality	Somewhat high quality	Undecided/ unsure	Somewhat low quality	Very low quality
2	0	1	0	0

How would you rate the trainer's knowledge of the program? (N=3)				
Very high	Somewhat high	Undecided/ unsure	Somewhat low	Very low
3	0	0	0	0

How would you rate the trainer overall? (N=3)			
Excellent	Good	Fair	Poor
3	0	0	0

Would you recommend the training to others? (N=3)		
Yes	No	Maybe
3	0	0

Comments about recommending training to others:

- This program, with its emphasis on cross generations, would strengthen Maine's communities because it appeals to a large portion of our population.

All Stars

To what extent did the training increase your knowledge about substance abuse prevention? (N=12)			
A lot	**Somewhat**	**A little**	**Not at all**
7	5	0	0

Perceived Effectiveness of All Stars Before and After Training
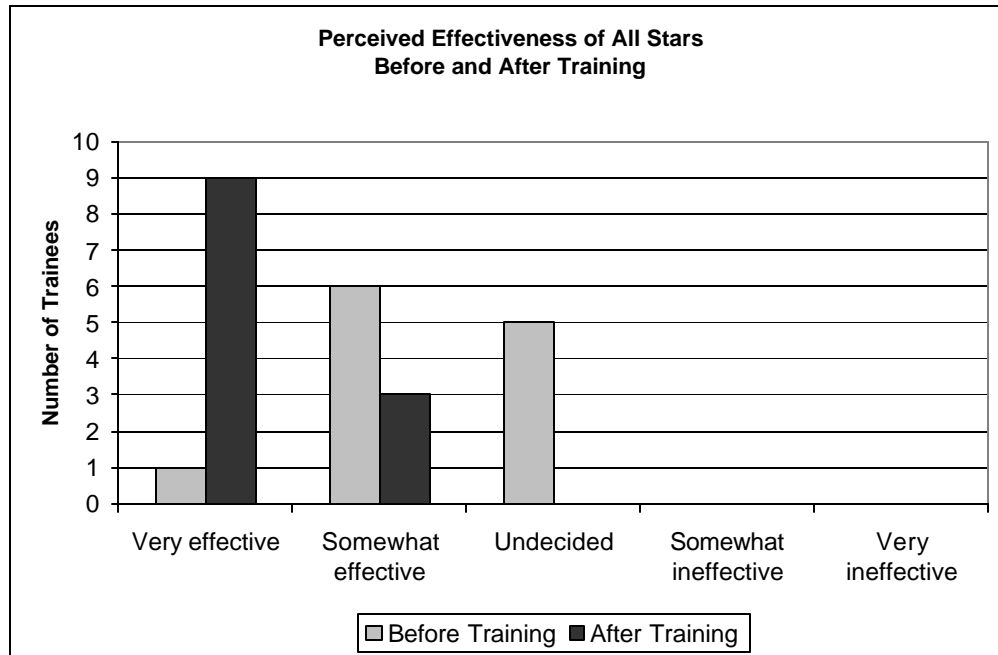
How prepared do you feel to implement the program? (N=12)				
Very prepared	**Somewhat prepared**	**Undecided/ unsure**	**Somewhat unprepared**	**Very unprepared**
8	4	0	0	0

Comments about preparedness for implementation:

- There was a lot of information all at once and I know the real experiences will be different.
- The program materials were well presented and well organized.
- The training plus my extensive work with children makes me feel very well prepared to implement this program.
- The manual is clear and well-organized.
- There is solid research behind All Stars.

How much emphasis did the trainer place on program fidelity during training? (N=12)			
A lot	**Somewhat**	**A little**	**Not at all**
9	1	2	0

How organized was the training? (N=12)				
Very organized	**Somewhat organized**	**Undecided/ unsure**	**Somewhat disorganized**	**Very disorganized**
12	0	0	0	0

How would you rate the quality of the training materials? (N=12)				
Very high quality	**Somewhat high quality**	**Undecided/ unsure**	**Somewhat low quality**	**Very low quality**
10	2	0	0	0

How would you rate the trainer's knowledge of the program? (N=12)				
Very high	**Somewhat high**	**Undecided/ unsure**	**Somewhat low**	**Very low**
12	0	0	0	0

How would you rate the trainer overall? (N=12)			
Excellent	**Good**	**Fair**	**Poor**
12	0	0	0

Would you recommend the training to others? (N=12)		
Yes	**No**	**Maybe**
12	0	0

Comments about recommending training to others:

- Anyone who plans to use All Stars should attend the training in order to deliver the program effectively.
- I would recommend training for others who might want to implement this program in their school or community.
- The training is recommended for someone looking for a prevention program for non-users and additional support for families to share values and delay risky behaviors.

Class Action

To what extent did the training increase your knowledge about substance abuse prevention? (N=8)			
A lot	**Somewhat**	**A little**	**Not at all**
0	1	5	2

Perceived Effectiveness of Class Action Before and After Training
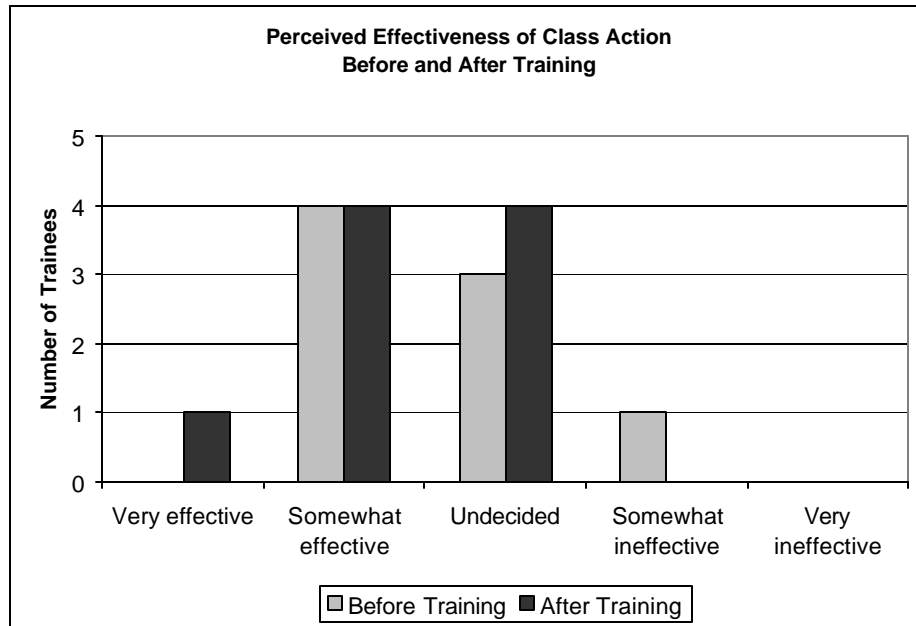
How prepared do you feel to implement the program? (N=9)				
Very prepared	**Somewhat prepared**	**Undecided/ unsure**	**Somewhat unprepared**	**Very unprepared**
1	5	0	0	3

Comments about preparedness for implementation:

- Too much information.
- The training was not very good.

How much emphasis did the trainer place on program fidelity during training? (N=9)			
A lot	**Somewhat**	**A little**	**Not at all**
2	4	3	0

How organized was the training? (N=9)				
Very organized	**Somewhat organized**	**Undecided/ unsure**	**Somewhat disorganized**	**Very disorganized**
1	3	0	2	3

How would you rate the quality of the training materials? (N=9)				
Very high quality	**Somewhat high quality**	**Undecided/ unsure**	**Somewhat low quality**	**Very low quality**
0	5	2	2	0

How would you rate the trainer's knowledge of the program? (N=9)				
Very high	**Somewhat high**	**Undecided/ unsure**	**Somewhat low**	**Very low**
1	2	0	4	2

How would you rate the trainer overall? (N=9)			
Excellent	**Good**	**Fair**	**Poor**
0	0	3	6

Would you recommend the training to others? (N=9)		
Yes	**No**	**Maybe**
0	7	2

Comments about recommending training to others:

- The curriculum is self-explanatory.
- There should be more clearly defined goals for what trainees want to get out of the training.
- The training is not necessary; the books are self-explanatory.

Communities Mobilizing for Change on Alcohol

To what extent did the training increase your knowledge about substance abuse prevention? (N=16)			
A lot	**Somewhat**	**A little**	**Not at all**
6	7	3	0
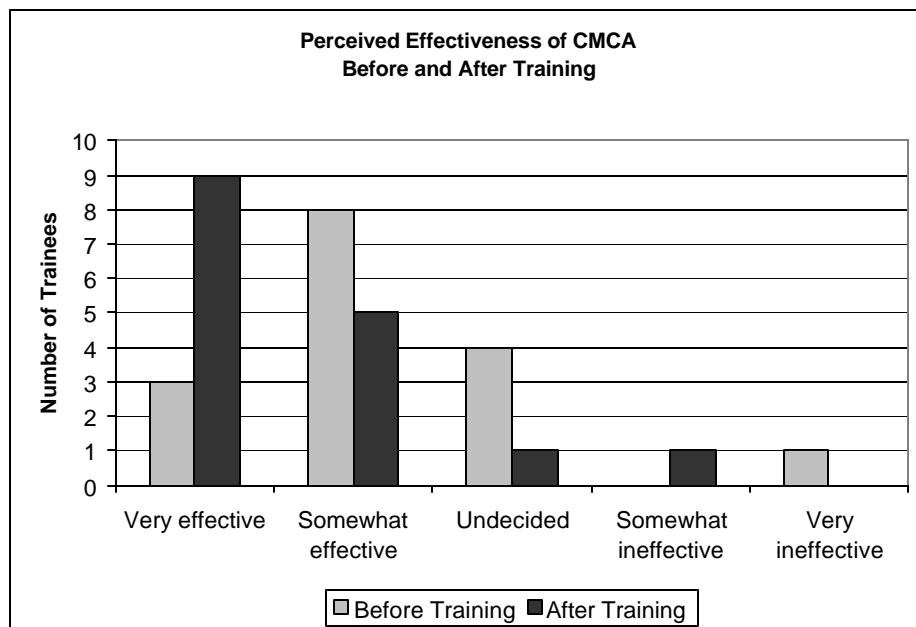
How prepared do you feel to implement the program? (N=16)				
Very prepared	**Somewhat prepared**	**Undecided/ unsure**	**Somewhat unprepared**	**Very unprepared**
5	8	2	1	0

Comments about preparedness for implementation:

- The focus on community organizing was helpful.
- This is a very complex program.
- I have the right tools to implement the program but the issue is figuring out who the players are in the community and getting them on board.
- Many different approaches to dealing with the issue were presented.
- I am not feeling completely confident due to my lack of experience.
- I am trying to get a grasp on where to start; we have such a huge rural area to consider.

How much emphasis did the trainer place on program fidelity during training? (N=16)			
A lot	**Somewhat**	**A little**	**Not at all**
10	6	0	0

How organized was the training? (N=16)				
Very organized	**Somewhat organized**	**Undecided/ unsure**	**Somewhat disorganized**	**Very disorganized**
11	5	0	0	0

How would you rate the quality of the training materials? (N=16)				
Very high quality	**Somewhat high quality**	**Undecided/ unsure**	**Somewhat low quality**	**Very low quality**
7	8	1	0	0

How would you rate the trainer's knowledge of the program? (N=16)				
Very high	**Somewhat high**	**Undecided/ unsure**	**Somewhat low**	**Very low**
15	1	0	0	0

How would you rate the trainer overall? (N=16)			
Excellent	**Good**	**Fair**	**Poor**
9	7	0	0

Would you recommend the training to others? (N=16)		
Yes	**No**	**Maybe**
14	0	2

Comments about recommending training to others:

- This was a great training, but I wish there was more emphasis on actual strategies rather than mobilizing communities.
- The program has very good concepts but will take great dedication and organization to implement.

Creating Lasting Family Connections

To what extent did the training increase your knowledge about substance abuse prevention? (N=3)			
A lot	**Somewhat**	**A little**	**Not at all**
1	0	2	0
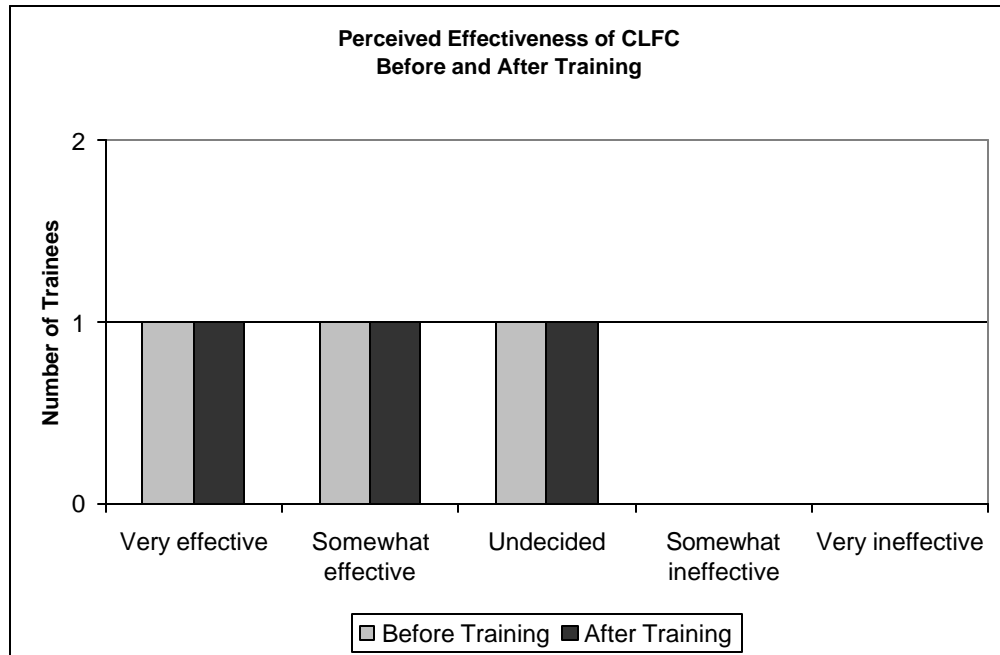
**Perceived Effectiveness of CLFC
Before and After Training**

How prepared do you feel to implement the program? (N=3)				
Very prepared	**Somewhat prepared**	**Undecided/ unsure**	**Somewhat unprepared**	**Very unprepared**
1	2	0	0	0

Comments about preparedness for implementation:

- I have facilitated groups before with youth and parents/adults.

How much emphasis did the trainer place on program fidelity during training? (N=3)			
A lot	Somewhat	A little	Not at all
3	0	0	0

How organized was the training? (N=3)				
Very organized	Somewhat organized	Undecided/ unsure	Somewhat disorganized	Very disorganized
3	0	0	0	0

How would you rate the quality of the training materials? (N=3)				
Very high quality	Somewhat high quality	Undecided/ unsure	Somewhat low quality	Very low quality
2	1	0	0	0

How would you rate the trainer's knowledge of the program? (N=3)				
Very high	Somewhat high	Undecided/ unsure	Somewhat low	Very low
3	0	0	0	0

How would you rate the trainer overall? (N=3)			
Excellent	Good	Fair	Poor
1	1	1	0

Would you recommend the training to others? (N=3)		
Yes	No	Maybe
3	0	0

Comments about recommending training to others:

- Teams from each school or community should attend to ensure that there are facilitators who are adequately trained.
- The training would be helpful for someone with little to no teaching experience.

Guiding Good Choices

To what extent did the training increase your knowledge about substance abuse prevention? (N=10)			
A lot	**Somewhat**	**A little**	**Not at all**
5	3	2	0
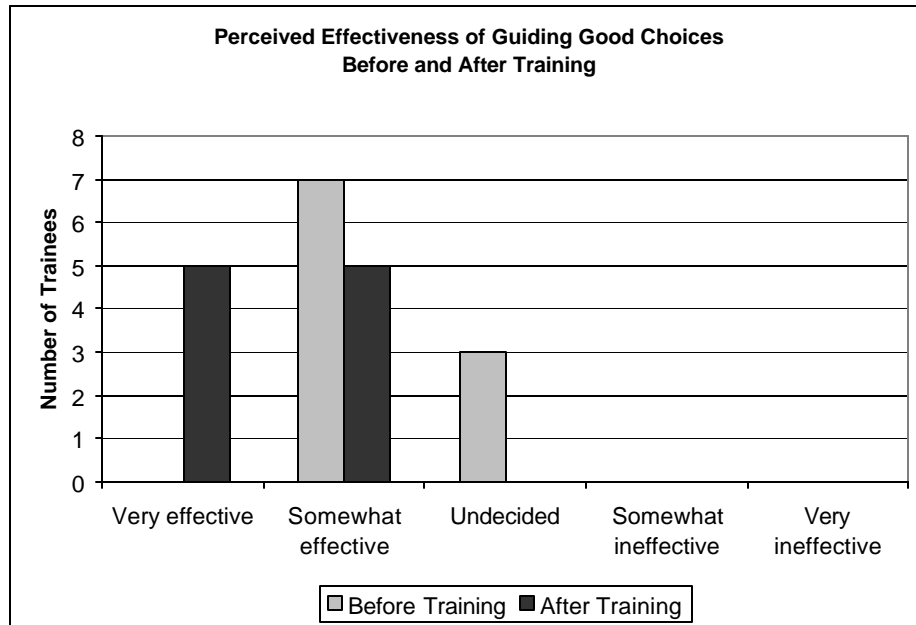
How prepared do you feel to implement the program? (N=10)				
Very prepared	**Somewhat prepared**	**Undecided/ unsure**	**Somewhat unprepared**	**Very unprepared**
6	4	0	0	0

Comments about preparedness for implementation:

- I am worried about the information fading away since we haven't yet run the program.
- Having the training and book as a guide to follow makes it possible to stay on task.

How much emphasis did the trainer place on program fidelity during training? (N=10)			
A lot	Somewhat	A little	Not at all
6	3	1	0

How organized was the training? (N=10)				
Very organized	Somewhat organized	Undecided/ unsure	Somewhat disorganized	Very disorganized
8	2	0	0	0

How would you rate the quality of the training materials? (N=10)				
Very high quality	Somewhat high quality	Undecided/ unsure	Somewhat low quality	Very low quality
8	2	0	0	0

How would you rate the trainer's knowledge of the program? (N=10)				
Very high	Somewhat high	Undecided/ unsure	Somewhat low	Very low
10	0	0	0	0

How would you rate the trainer overall? (N=10)			
Excellent	Good	Fair	Poor
9	1	1	0

Would you recommend the training to others? (N=10)		
Yes	No	Maybe
10	0	0

Comments about recommending training to others:

- The training was easy to understand.
- I would recommend it as a workshop or training for a whole community and to teens and parents.

Leadership and Resiliency Program

To what extent did the training increase your knowledge about substance abuse prevention? (N=8)			
A lot	**Somewhat**	**A little**	**Not at all**
2	5	1	0
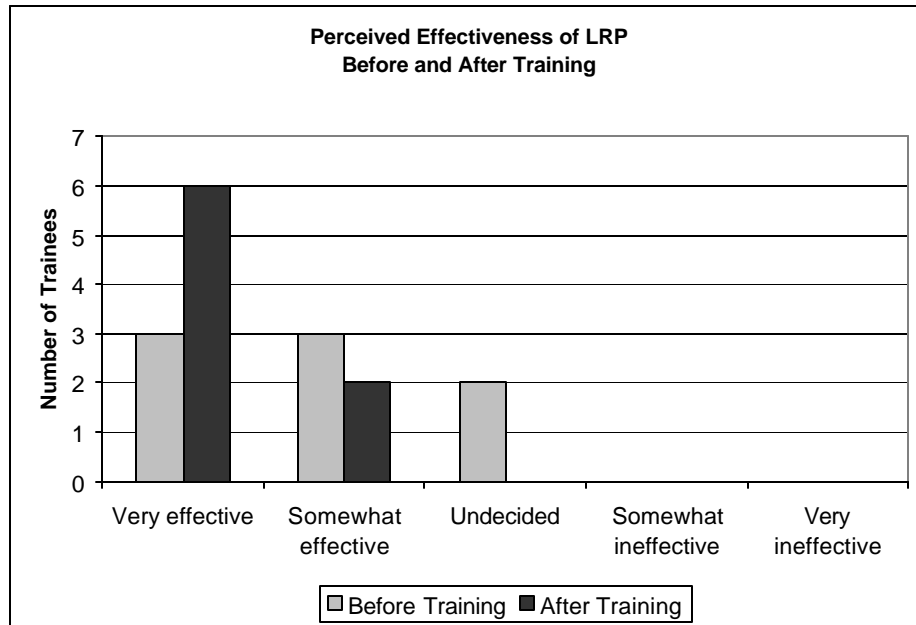
Perceived Effectiveness of LRP
Before and After Training

How prepared do you feel to implement the program? (N=8)				
Very prepared	**Somewhat prepared**	**Undecided/ unsure**	**Somewhat unprepared**	**Very unprepared**
7	1	0	0	0

Comments about preparedness for implementation:

- The developers have been very accessible and willing to answer questions and advise via telephone.
- I feel prepared to implement the essence of what they discussed and to provide some of the same activities.

How much emphasis did the trainer place on program fidelity during training? (N=8)			
A lot	Somewhat	A little	Not at all
3	4	1	0

How organized was the training? (N=8)				
Very organized	Somewhat organized	Undecided/ unsure	Somewhat disorganized	Very disorganized
6	2	0	0	0

How would you rate the quality of the training materials? (N=8)				
Very high quality	Somewhat high quality	Undecided/ unsure	Somewhat low quality	Very low quality
6	2	0	0	0

How would you rate the trainer's knowledge of the program? (N=8)				
Very high	Somewhat high	Undecided/ unsure	Somewhat low	Very low
7	1	0	0	0

How would you rate the trainer overall? (N=8)			
Excellent	Good	Fair	Poor
7	1	0	0

Would you recommend the training to others? (N=8)		
Yes	No	Maybe
7	0	1

Comments about recommending training to others:

- Amazing training. Amazing program.
- The training is definitely helpful for those who have little formal training in substance abuse prevention.
- I would recommend the training for people who already have teaching skills and who already understand prevention. The training does not seem to be designed for novices. I thought the trainers were terrific.
- A longer training is needed to cover more of the curriculum.

LifeSkills Training

To what extent did the training increase your knowledge about substance abuse prevention? (N=3)			
A lot	**Somewhat**	**A little**	**Not at all**
1	1	1	0
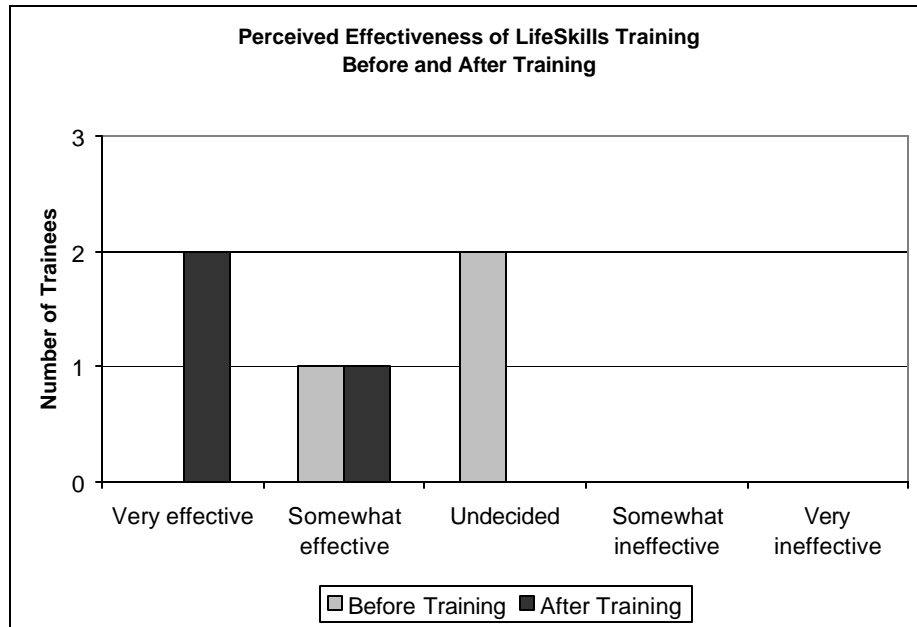
**Perceived Effectiveness of LifeSkills Training
Before and After Training**

How prepared do you feel to implement the program? (N=3)				
Very prepared	**Somewhat prepared**	**Undecided/ unsure**	**Somewhat unprepared**	**Very unprepared**
1	2	0	0	0

How much emphasis did the trainer place on program fidelity during training? (N=3)			
A lot	Somewhat	A little	Not at all
3	0	0	0

How organized was the training? (N=3)				
Very organized	Somewhat organized	Undecided/ unsure	Somewhat disorganized	Very disorganized
2	1	0	0	0

How would you rate the quality of the training materials? (N=3)				
Very high quality	Somewhat high quality	Undecided/ unsure	Somewhat low quality	Very low quality
1	2	0	0	0

How would you rate the trainer's knowledge of the program? (N=3)				
Very high	Somewhat high	Undecided/ unsure	Somewhat low	Very low
2	1	0	0	0

How would you rate the trainer overall? (N=3)			
Excellent	Good	Fair	Poor
2	1	0	0

Would you recommend the training to others? (N=3)		
Yes	No	Maybe
2	0	1

Comments about recommending training to others:

- I would recommend the training annually for more ideas and conversation with other trainees.
- It is recommended for someone who has not taught the LifeSkills program before.

Lion's Quest

To what extent did the training increase your knowledge about substance abuse prevention? (N=10)			
A lot	**Somewhat**	**A little**	**Not at all**
3	3	3	1
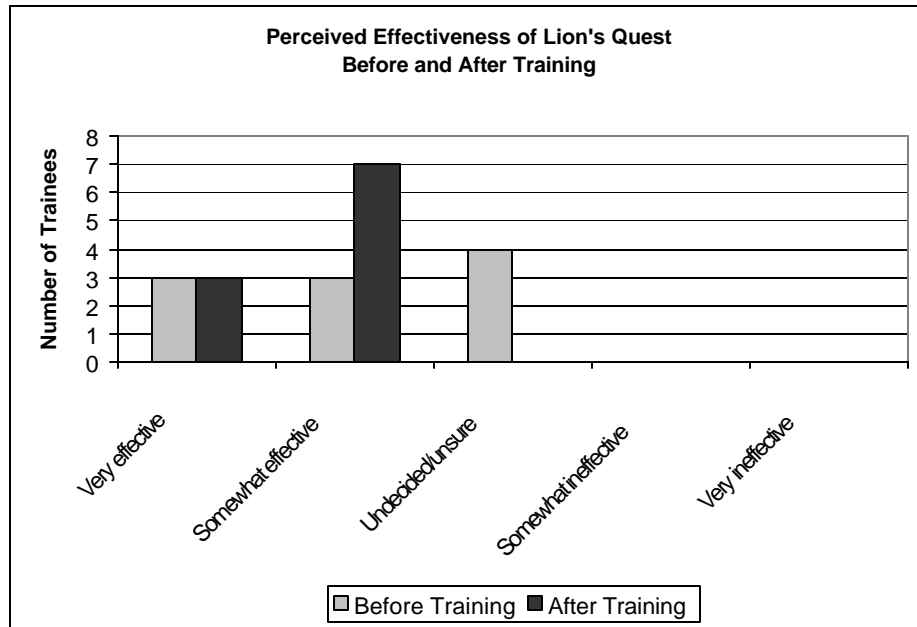
Perceived Effectiveness of Lion's Quest Before and After Training

How prepared do you feel to implement the program? (N=10)				
Very prepared	**Somewhat prepared**	**Undecided/ unsure**	**Somewhat unprepared**	**Very unprepared**
5	4	1	0	0

Comments about preparedness for implementation:

- After training, we realized that it was too comprehensive for our schools.
- It's a wonderful program. I am not able to use the whole program, but was able to use a lot of it in my classes.
- Our school chose not to implement the program.

How much emphasis did the trainer place on program fidelity during training? (N=10)			
A lot	Somewhat	A little	Not at all
8	1	1	0

How organized was the training? (N=10)				
Very organized	Somewhat organized	Undecided/ unsure	Somewhat disorganized	Very disorganized
10	0	0	0	0

How would you rate the quality of the training materials? (N=10)				
Very high quality	Somewhat high quality	Undecided/ unsure	Somewhat low quality	Very low quality
8	2	0	0	0

How would you rate the trainer's knowledge of the program? (N=10)				
Very high	Somewhat high	Undecided/ unsure	Somewhat low	Very low
9	1	0	0	0

How would you rate the trainer overall? (N=10)			
Excellent	Good	Fair	Poor
9	1	0	0

Would you recommend the training to others? (N=10)		
Yes	No	Maybe
9	0	1

Comments about recommending training to others:

- The program has lots of good information. I would suggest that all teachers attend.
- Schools should know how comprehensive the program is prior to training and see if it can be implemented with fidelity given the time constraints on schools.

Olweus Bullying Prevention Program

To what extent did the training increase your knowledge about substance abuse prevention? (N=18)			
A lot	Somewhat	A little	Not at all
6	3	3	6

Perceived Effectiveness of Olweus Bullying Prevention Program Before and After Training
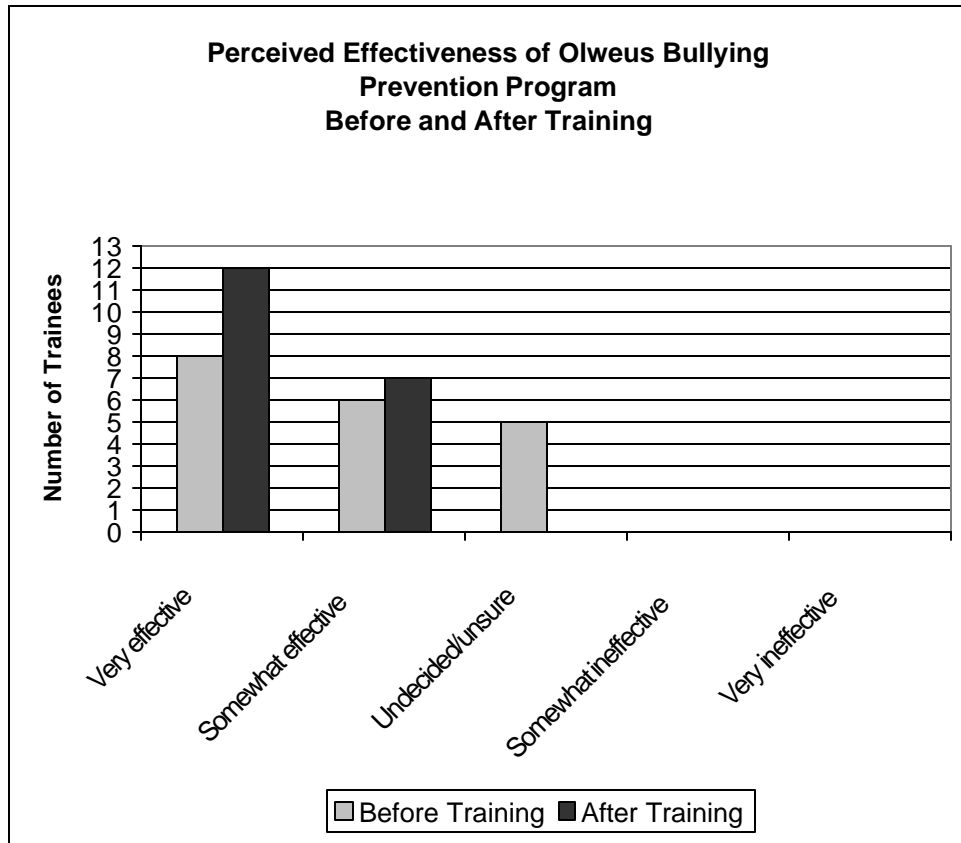
How prepared do you feel to implement the program? (N=19)				
Very prepared	Somewhat prepared	Undecided/ unsure	Somewhat unprepared	Very unprepared
13	6	0	0	0

How much emphasis did the trainer place on program fidelity during training? (N=19)			
A lot	Somewhat	A little	Not at all
16	2	1	0

How organized was the training? (N=19)				
Very organized	Somewhat organized	Undecided/ unsure	Somewhat disorganized	Very disorganized
16	3	0	0	0

How would you rate the quality of the training materials? (N=19)				
Very high quality	Somewhat high quality	Undecided/ unsure	Somewhat low quality	Very low quality
10	9	0	0	0

How would you rate the trainer's knowledge of the program? (N=19)				
Very high	Somewhat high	Undecided/ unsure	Somewhat low	Very low
18	1	0	0	0

How would you rate the trainer overall? (N=19)			
Excellent	Good	Fair	Poor
17	2	0	0

Would you recommend the training to others? (N=19)		
Yes	No	Maybe
18	0	1

Comments about recommending training to others:

- I think it is essential that all staff are fully interested in implementing the program.
- The training would be effective for individuals working with youth in a structured setting that would be able to follow through with all facets of the program.
- I would recommend additional training during the school year.

Parenting Wisely

To what extent did the training increase your knowledge about substance abuse prevention? (N=17)			
A lot	**Somewhat**	**A little**	**Not at all**
1	3	7	6

Perceived Effectiveness of Parenting Wisely Before and After Training
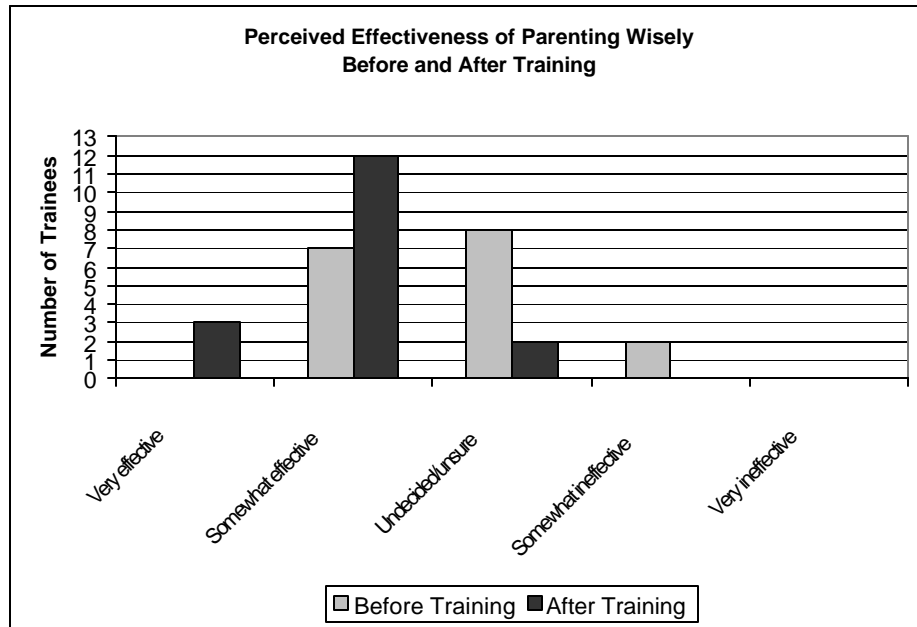
How prepared do you feel to implement the program? (N=17)				
Very prepared	**Somewhat prepared**	**Undecided/ unsure**	**Somewhat unprepared**	**Very unprepared**
9	7	0	1	0

Comments about preparedness for implementation:

- I have prepared myself. The training did not concentrate on practical items. Instead the owner was still "selling." We just needed some real walk-through of the components.
- I think no matter how prepared you think you may be, there will always be glitches.
- The trainer covered materials thoroughly.

How much emphasis did the trainer place on program fidelity during training? (N=17)			
A lot	Somewhat	A little	Not at all
6	5	5	1

How organized was the training? (N=17)				
Very organized	Somewhat organized	Undecided/ unsure	Somewhat disorganized	Very disorganized
4	9	0	4	0

How would you rate the quality of the training materials? (N=17)				
Very high quality	Somewhat high quality	Undecided/ unsure	Somewhat low quality	Very low quality
6	5	2	2	2

How would you rate the trainer's knowledge of the program? (N=17)				
Very high	Somewhat high	Undecided/ unsure	Somewhat low	Very low
13	3	1	0	0

How would you rate the trainer overall? (N=17)			
Excellent	Good	Fair	Poor
4	6	5	2

Would you recommend the training to others? (N=17)		
Yes	No	Maybe
9	6	2

Comments about recommending training to others:

- I would recommend it only if it was more practical.
- It is recommended for an instructor with little or no experience wit parenting groups or teaching.
- The training is a good overview of Parenting Wisely.
- The format was more about why to use it than how to use it.
- There is better material available that is more concrete and substantial that could have been presented.

Positive Action

To what extent did the training increase your knowledge about substance abuse prevention? (N=3)			
A lot	**Somewhat**	**A little**	**Not at all**
0	0	0	3
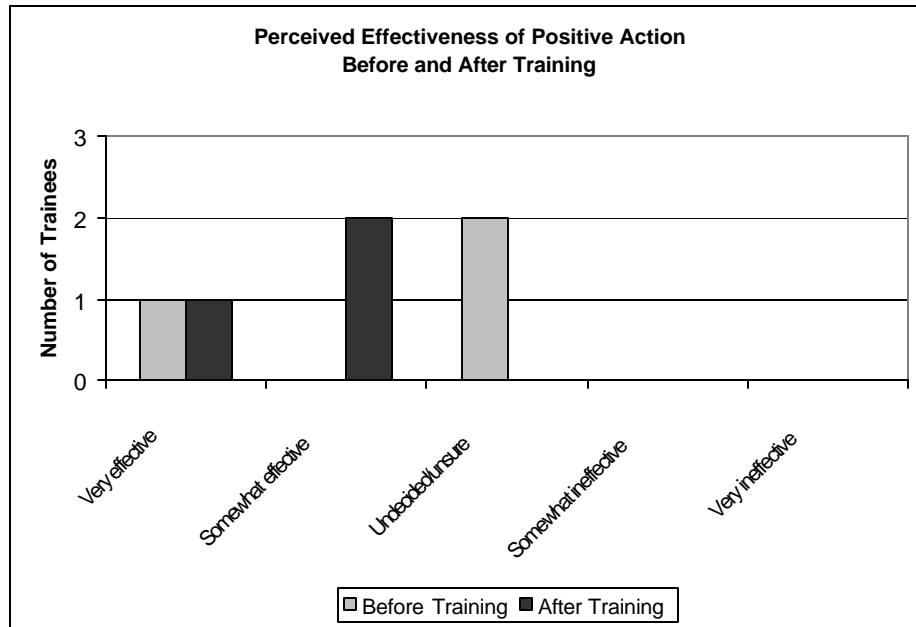
Perceived Effectiveness of Positive Action Before and After Training

How prepared do you feel to implement the program? (N=3)				
Very prepared	**Somewhat prepared**	**Undecided/ unsure**	**Somewhat unprepared**	**Very unprepared**
2	1	0	0	0

Comments about preparedness for implementation:

▪ Materials were simplistic and easy to use and understand.

How much emphasis did the trainer place on program fidelity during training? (N=3)			
A lot	**Somewhat**	**A little**	**Not at all**
2	1	0	0

How organized was the training? (N=3)				
Very organized	**Somewhat organized**	**Undecided/ unsure**	**Somewhat disorganized**	**Very disorganized**
1	1	0	1	0

How would you rate the quality of the training materials? (N=3)				
Very high quality	**Somewhat high quality**	**Undecided/ unsure**	**Somewhat low quality**	**Very low quality**
1	1	0	1	0

How would you rate the trainer's knowledge of the program? (N=3)				
Very high	**Somewhat high**	**Undecided/ unsure**	**Somewhat low**	**Very low**
0	1	1	1	0

How would you rate the trainer overall? (N=3)			
Excellent	**Good**	**Fair**	**Poor**
0	1	2	0

Would you recommend the training to others? (N=3)		
Yes	**No**	**Maybe**
1	1	1

Reconnecting Youth

To what extent did the training increase your knowledge about substance abuse prevention? (N=8)			
A lot	**Somewhat**	**A little**	**Not at all**
1	4	3	0
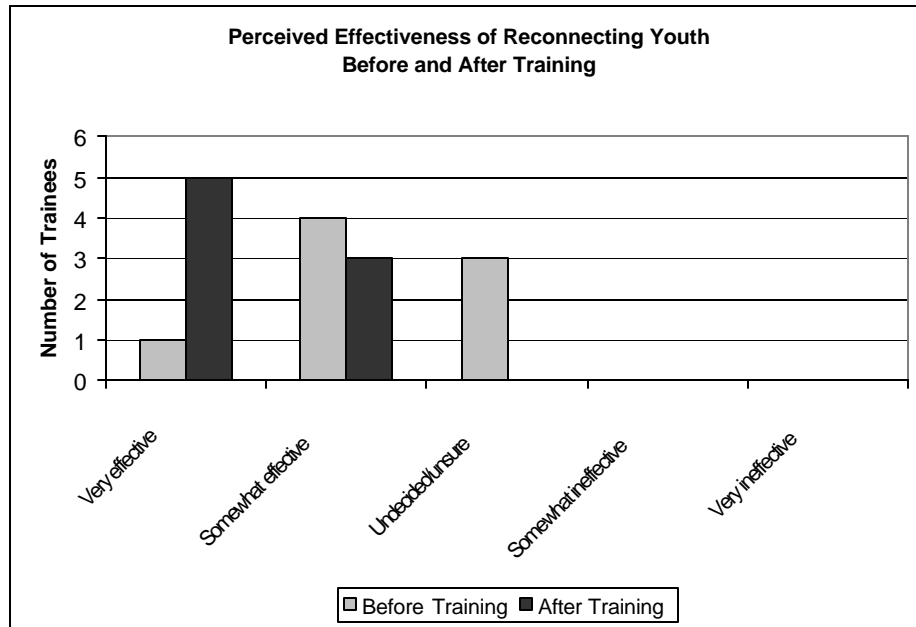
Perceived Effectiveness of Reconnecting Youth
Before and After Training

How prepared do you feel to implement the program? (N=8)				
Very prepared	**Somewhat prepared**	**Undecided/ unsure**	**Somewhat unprepared**	**Very unprepared**
4	4	0	0	0

Comments about preparedness for implementation:

- I believe the first time this course is offered I will need a lot of time in order to prepare and carry out the lesson plan according to program guidelines. I need practice to feel prepared with confidence.
- The materials and extensive training were adequate preparation.
- Successful implementation requires a compatible staff, administration and guidance office.

How much emphasis did the trainer place on program fidelity during training? (N=8)			
A lot	**Somewhat**	**A little**	**Not at all**
8	0	0	0

How organized was the training? (N=8)				
Very organized	**Somewhat organized**	**Undecided/ unsure**	**Somewhat disorganized**	**Very disorganized**
6	2	0	0	0

How would you rate the quality of the training materials? (N=8)				
Very high quality	**Somewhat high quality**	**Undecided/ unsure**	**Somewhat low quality**	**Very low quality**
5	3	0	0	0

How would you rate the trainer's knowledge of the program? (N=8)				
Very high	**Somewhat high**	**Undecided/ unsure**	**Somewhat low**	**Very low**
8	0	0	0	0

How would you rate the trainer overall? (N=8)			
Excellent	**Good**	**Fair**	**Poor**
7	1	0	0

Would you recommend the training to others? (N=8)		
Yes	**No**	**Maybe**
8	0	0

Comments about recommending training to others:

- I would recommend it to any public institution and some larger corporate private organizations.
- The more people who approach children in this manner, the more they will feel connected.

Second Step

To what extent did the training increase your knowledge about substance abuse prevention? (N=8)			
A lot	**Somewhat**	**A little**	**Not at all**
0	1	3	4
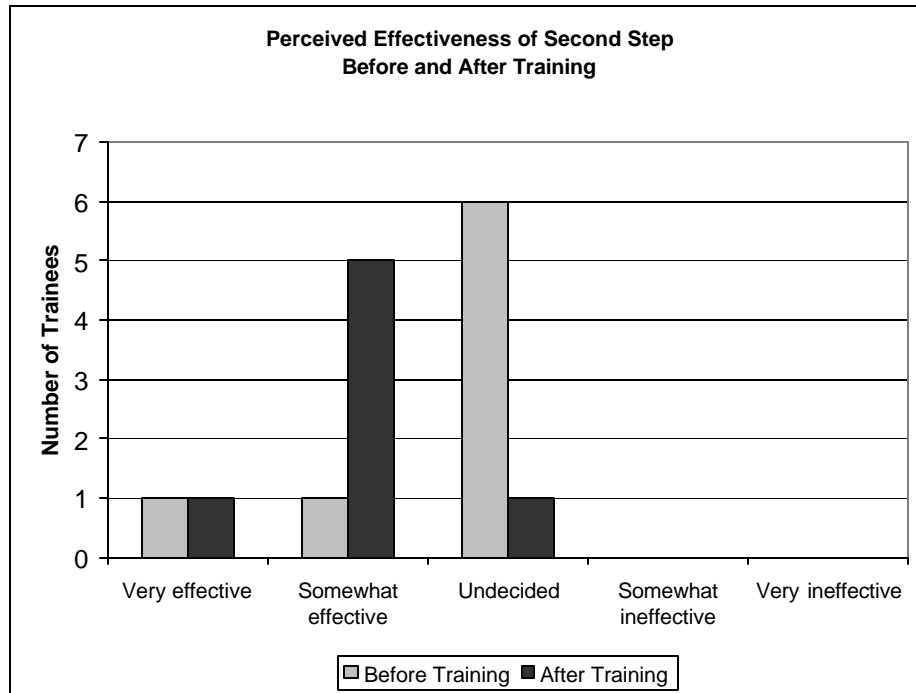
Perceived Effectiveness of Second Step Before and After Training

How prepared do you feel to implement the program? (N=7)				
Very prepared	**Somewhat prepared**	**Undecided/ unsure**	**Somewhat unprepared**	**Very unprepared**
1	6	0	0	0

Comments about preparedness for implementation:

- I felt the program was effective once I began using after training.
- I have not had a chance to go over the grade appropriate lessons I will be teaching.
- Using the program will make me more confident in implementing it.

How much emphasis did the trainer place on program fidelity during training? (N=7)			
A lot	Somewhat	A little	Not at all
2	3	1	1

How organized was the training? (N=7)				
Very organized	Somewhat organized	Undecided/ unsure	Somewhat disorganized	Very disorganized
2	3	2	0	0

How would you rate the quality of the training materials? (N=8)				
Very high quality	Somewhat high quality	Undecided/ unsure	Somewhat low quality	Very low quality
1	2	3	1	1

How would you rate the trainer's knowledge of the program? (N=8)				
Very high	Somewhat high	Undecided/ unsure	Somewhat low	Very low
2	2	2	2	0

How would you rate the trainer overall? (N=7)			
Excellent	Good	Fair	Poor
2	2	3	0

Would you recommend the training to others? (N=8)		
Yes	No	Maybe
2	4	2

Comments about recommending training to others:

- I would rather have a person present material instead of viewing videos.
- There was no trainer, just a video.
- I would recommend it for the whole school.

STARS for Families

To what extent did the training increase your knowledge about substance abuse prevention? (N=7)			
A lot	**Somewhat**	**A little**	**Not at all**
1	3	0	3
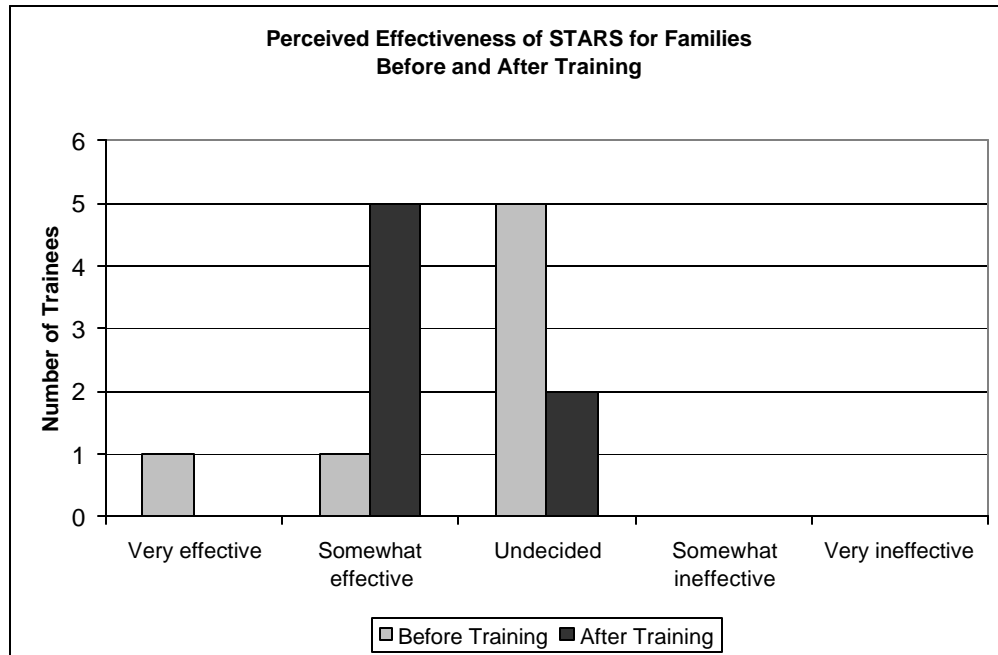
Perceived Effectiveness of STARS for Families Before and After Training

How prepared do you feel to implement the program? (N=7)				
Very prepared	**Somewhat prepared**	**Undecided/ unsure**	**Somewhat unprepared**	**Very unprepared**
3	1	1	1	1

Comments about preparedness for implementation:

- I believe that once I receive the appropriate materials and am able to go over them again at length I will be prepared to implement the program.
- Our training was very informative and easily understood.
- The training wasn't done very well. The material was not delivered in a manner appropriate for the audience. The instructor told many stories about herself and her issues.

How much emphasis did the trainer place on program fidelity during training? (N=7)			
A lot	**Somewhat**	**A little**	**Not at all**
5	2	0	0

How organized was the training? (N=7)				
Very organized	**Somewhat organized**	**Undecided/ unsure**	**Somewhat disorganized**	**Very disorganized**
4	2	0	1	0

How would you rate the quality of the training materials? (N=7)				
Very high quality	**Somewhat high quality**	**Undecided/ unsure**	**Somewhat low quality**	**Very low quality**
2	3	1	0	1

How would you rate the trainer's knowledge of the program? (N=7)				
Very high	**Somewhat high**	**Undecided/ unsure**	**Somewhat low**	**Very low**
4	2	1	0	0

How would you rate the trainer overall? (N=7)			
Excellent	**Good**	**Fair**	**Poor**
3	2	1	1

Would you recommend the training to others? (N=8)		
Yes	**No**	**Maybe**
2	3	2

Comments about recommending training to others:

- I would recommend the training if it was relevant to a person's job description. It would be helpful to have some parents in the community attend as well.
- The trainer was friendly and made me feel comfortable.

Appendix B: Environmental Strategy Activity Tables

Community Mobilization and Information Dissemination

Change Targeted	Activities Conducted by the Coalition	Steps Taken by Those Outside Coalition to Address Targeted Change
Increase local community awareness regarding alcohol abuse and youth (all coalitions)[3]	- Hold community forums for community assessment (all coalitions) - Identify current community norms; determine desired norms (all coalitions)	
Develop strategy or action teams to implement CMCA or CTI (all coalitions)	- Form environmental strategy or action team*4 (9 coalitions) - Recruit environmental strategy or action team (4 coalitions) - Plan to recruit an environmental strategy or action team (1 coalition)	Local police inform coalition of substance abuse related law enforcement news
Increase awareness of community members through grassroots efforts (8 coalitions)	- Plan to conduct one-on-ones (2 coalitions) - Conduct one-on-ones* - Conduct door-to-doors* - Develop e-mail list to inform people when door-to-doors are to be conducted* - Conduct presentations to small groups and educating community agencies and members individually about CMCA (3 coalitions)	- Parent network newsletter publishes CMCA information* - Church newsletter publishes CMCA information* - Local clergy influence local government official council member to respond to CMCA*

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[3] Information in brackets shows the number of coalitions with the specified targeted change or activity. Where there are no brackets, only one coalition has the specified target or is engaged in the activity.
[4] Those activities with an asterisk have been completed.

Change Targeted	Activities Conducted by the Coalition	Steps Taken by Those Outside Coalition to Address Targeted Change
Increase awareness of local government (3 coalitions)	- Work with local governments to pass resolutions or make proclamations regarding alcohol and youth, including accepting the findings of the National Academy of Sciences and proclaiming Alcohol Awareness weeks or months (4 coalitions) - Present MYDAUS data to educate town councils (4 coalitions)* - Work with Senators Mitchell and Davis to promote CMCA (2 coalitions)	Local governments adopt statements regarding alcohol use (4 coalitions)*
Increase awareness of law enforcement (all coalitions)	- Recruit law enforcement to participate in CMCA team by providing training (4 coalitions)* - Work with local law enforcement (11 coalitions) - Work with sheriff's department (2 coalitions) - Work with DARE Officer to inform other officers of strategy team meeting content and goals	
Increase awareness in schools	- Meet with school principals about CMCA - Make presentations for school staff on CMCA for recruitment purposes* - As part of a One ME non-model program area middle school drama team write a script for a play; perform play for three middle schools	

Change Targeted	Activities Conducted by the Coalition	Steps Taken by Those Outside Coalition to Address Targeted Change
	▪ High school creates an awareness video examining consequences of substance abuse as part of non-model program ▪ Plan a poster contest within local schools regarding substance abuse ▪ Provide refreshments and relevant literature for high school event* ▪ Attend training on social marketing and norms related to alcohol use; working with high schools to implement a social marketing plan in schools (2 coalitions)*	
Increase awareness of youth outside of school (1 coalition)		▪ Elementary school and police department collaborate to support summer teen center
Increase awareness of parents (1 coalition)	▪ Plan presentations to parent groups using data on youth alcohol use ▪ Distribute 2,400 OSA Parent Kit flyers throughout communities*	
Increase awareness of other groups in the community (12 coalitions)	▪ Plan community forum to generate discussion ▪ Write letters to parents and businesses so that businesses can include flyers about themselves in OSA Parent Kits	

Change Targeted	Activities Conducted by the Coalition	Steps Taken by Those Outside Coalition to Address Targeted Change
	▪ Plan to hold parental awareness meetings such as "Saying No is Not Enough" and Book Clubs that focus on prevention ▪ Maintain an alcohol education table at community events (3 coalitions)* ▪ Solicit the participation of the police department to speak to the community about youth substance abuse* ▪ Participate in state-level alcohol policy group and bring resources and ideas back to coalition meetings (2 coalitions) ▪ Present MYDAUS data to a group of 11 future supervisors on recognizing g and taking action regarding youth substance use on the job*	

Change Targeted	Activities Conducted by the Coalition	Steps Taken by Those Outside Coalition to Address Targeted Change
Increase awareness through use of mass media (11 coalitions)	- Research social norms marketing - Make a radio announcement about CTI* - Place ads and inserts in local newspapers; supply information on laws, health education and consequences (4 coalitions)* - Ask a member of the local media to cover CMCA issues* - Write op-ed piece - Plan to write a letter to the editor on CMCA* - Work with hospital marketing department to produce press releases for local newspaper* - Write monthly column on an issues associated with underage alcohol use and submit to a local newspaper for publication - Run weekly articles and advertisements on prevention marijuana use - Sponsor social marketing campaigns in local newspaper; ran the following six-week campaigns: "Do you Know?"; server and seller campaign; parent responsibility* - Purchase weekly ads for future campaigns	- Radio station broadcasts announcement about CTI - Other substance abuse organization (Hazelden) runs an ad in local newspaper* - Local newspaper covers environmental strategy event (5 coalitions)* - Two newspapers publish articles written by coalition member* - Independent from coalition, newspaper runs ads and articles regarding alcohol use*
Increase state level awareness of youth-related alcohol issues (4 coalitions)	- Work with State Policy group (3 coalitions) - Apply for complimentary substance use prevention grant from the Office of Juvenile Justice and Delinquency Prevention (OJJDP)*	- Police departments and college security complete a survey to identify which brands of alcohol youth drink and submitted results to Attorney General Rowe* - Policy group addressing issue of alcohol companies targeting youth in ads

Change Targeted	Activities Conducted by the Coalition	Steps Taken by Those Outside Coalition to Address Targeted Change
Increase community awareness and wellness around issues related to alcohol (2 coalitions)	- Establish a center to attract agencies that serve families; recruited agencies to the center * - Plan a Health Screening Day	- Service agencies co-locate at a center in the community* - Restaurants display informational table tents* - Stores distribute point of purchase items with alcohol prevention information on them* - Various agencies distribute brochures in the community* - Schools hold a poster contest on substance abuse issues* - Alcohol display boards shown on schools and buses

Policy Change

Institutional Policies

Change Targeted	Activities Conducted by Coalition	Steps Taken by Those Outside Coalition to Address Targeted Change
Ensure that visible signage outlining alcohol and tobacco use laws are displayed in common areas in the community (e.g., parks and playing fields) (2 coalitions)	▪ Plan to designate newly funded youth skate park a drug-free zone when it opens ▪ Participate in HMP coalition and provide resources and technical assistance	▪ Staff members of local Parks and recreation and the municipality agree to post drug-free zone signs in skate park ▪ Members from HMP coalition educated staff from municipalities to reduce pro-tobacco and alcohol signage and /or restrict tobacco and alcohol sponsorship of events
Revise or develop explicit police department policies regarding house parties and alcohol (1 coalition)	▪ Work with police department to clarify existing policies and practices	
Review school policies on drinking (1 coalition)	▪ Assist with school policy review	▪ School considering revision of chemical health policy
Increase communication, planning and programs between school, law enforcement and other agencies on strategies to reduce underage drinking and substance use (5 coalitions)	▪ Work with agencies to improve interagency communication regarding substance abuse (4 coalitions) ▪ Meet with School Board and police to improve school – police relationship* ▪ Work with police to persuade them to play supportive role with schools regarding substance abuse* ▪ Work with community members to encourage institution of school resource officer ▪ Participate in State Policy Group	▪ Parents go to School Board regarding school resource officer; Board referred parents to Substance Abuse Task Force*

Community-Initiated Regulations

Change Targeted	Activities Conducted by Coalition	Steps Taken by Those Outside Coalition to Address Targeted Change
Review and increase enforcement of college policies on underage alcohol use in the One ME service area (1 coalition)	▪ Participate in College Underage Drinking Prevention Coalition and provide resources and technical assistance	▪ A related prevention effort, the Higher Education Alcohol Prevention Project is leading the effort to revise policies and increase enforcement
Increase parental familiarity with and level of enforcement of school substance us policies and procedures (2 coalitions)	▪ Form a working group to review and make recommendations on school policies* ▪ Interview law enforcement and judicial representatives to learn why and how to incorporate diversion programs for minors caught using alcohol*	▪ Superintendent writes an open letter to the community reinforcing school policy and unlawfulness of furnishing alcohol to minors; letter is published in two local newspapers* ▪ Assistant District Attorney presents to coalition regarding use of diversion programs for youth who violate substance use policies

Enforcement of Alcohol Laws and Policies

Change Targeted	Activities Conducted by Coalition	Steps Taken by Those Outside Coalition to Address Targeted Change
Increase consistency of police patrols of local night clubs, parks and other youth "hang-outs" to monitor for and cite alcohol violations (3 coalitions)	▪ Develop relationship with local police department ▪ Plan to reeducate law enforcement professionals about liquor licensing duties and available diversion programs ▪ Plan to activate contract with AdCare for Student Intervention Reintegration Program (SIRP) and use One ME funds for Boomerang ▪ Participate in state-level alcohol Policy Group ▪ Distribute resource postcard to law enforcement officers* ▪ Educate officers and retail alcohol outlets about free on-line responsible beverage server training* ▪ Provide for additional police officer to patrol prom* ▪ Work with police department to establish targeted patrols ▪ Work with police department on establishing sobriety checkpoints	▪ Police departments in a One ME service area regularly refer issues to Liquor Licensing ▪ Law enforcement officers refer underage alcohol citations to diversion programs ▪ Police seek out coalition coordinator regarding community alcohol related issues ▪ Town Council is petitioning for additional police officer to be hired to patrol for substance abuse ▪ Police department creates a special forces team to address liquor licensing issues in community; officers follow-up on every complaints, maintain logs and report to City Council* ▪ AdCare holds a grant to offer Student Intervention Reintegration Program (SIRO), a diversion program for underage alcohol use
Increase enforcement of existing laws and policies regarding alcohol and minors (2 coalitions)	▪ Work with police department to increase enforcement (2 coalitions)* ▪ Work with county judge to develop a strategy* ▪ Plan to increase police knowledge on enforcement of specific laws regarding alcohol use and youth	▪ Police department enforcing zero tolerance policy on OUI ▪ County judge issuing stiff penalties to offenders when offenses involve youth ▪ Area police forces planning to attend a training on liquor laws

Youth Access to Alcohol

Change Targeted	Activities Conducted by Coalition	Steps Taken by Those Outside Coalition to Address Targeted Change
Reduce amount of alcohol transferred from adults age 21 years and older to underage youth (10 coalitions)	- Educate law enforcement officers regarding the transfer of alcohol from young adults to underage youth and encourage the use of diversion programs for offenders - Seek data from police departments regarding citations for providing alcohol to minors - Implement Sticker Shock; teams of youth and coalition members affix bright stickers to alcohol products informing consumers of legal drinking age and unlawfulness of providing alcohol to minors: - Plan Sticker Shock (2 coalitions - Complete Sticker Shock (7 coalitions)* - Plan to persuade a club near local university to change its wrist band policy for underage patrons to effectively reduce youth access to alcohol	- Retail outlets provide consent for teams of youth and coalitions to conduct Sticker Shock - University Greek Life Coordinator and University Substance Abuse Director meet* - Colleges hold fraternities accountable for whom they serve alcohol
Increase community knowledge of penalties for furnishing to minors (5 coalitions)	- Research development of ordinance - Educate public on laws (3 coalitions)	- Shaw's corporate participates in Sticker Shock - Shaw's places Parenting Kits from OSA in break rooms - Television station covers Sticker Shock launch* - Student organizations volunteer to apply stickers for Sticker Shock*
Reduce the number of parties on private property where alcohol is available to youth and the parent perception that underage drinking is inevitable and that it is safer to have them drink at home *and*	- Research policies in other states regarding parties on private property - Explore development of an ordinance and educating public on laws on the issue - Plan to implement a Safe	Police departments are in planning phase of initiating a Turn Key Program where parents inform police department when they will be away so officers can monitor home to keep it safe

Change Targeted	Activities Conducted by Coalition	Steps Taken by Those Outside Coalition to Address Targeted Change
Increase parent support of law regarding serving alcohol to adults age 21 and older in their homes (3 coalitions)	Homes Program among parents of middle school students initiated through school mailings to parents (2 parents)	

Distribution of Alcohol by Establishments

Change Targeted	Activities Conducted by Coalition	Steps Taken by Those Outside Coalition to Address Targeted Change
Reduce amount of alcohol sold to underage patrons of retail outlets (bars, restaurants, stores) (2 coalitions)	- Research possibility of linking merchant training with compliance checks* - Coalition members educate professional contacts regarding availability of free on-line merchant training for responsible beverage service - Publicize availability of on-line server training* - Encourage stores to routinely train employees in RBS - Recognize retailers who participate in Sticker Shock with thank you notes* - Plan to do an on-line RBS training - Discuss with police the possibility of a compliance program for local businesses - Coordinate server training for bar employees and owners - Hold regular bar owner meetings to coordinate on issues	- OSA funded an agency to provide free on-line server training to local retailers through 2005; law enforcement encourages merchants to participate - Bar owners and staff members attend and participate in Server Training* - A related prevention effort, the Higher Education Alcohol Prevention Project, is offering access to on-line training
Increase retailer support of and compliance with law on serving alcohol to patrons age 21 and older (1 coalition)	One ME coordinator initiates and maintains regular bar owner meetings with law enforcement officers to facilitate communication about and support for this law	
Improve merchants' ability to recognize fake ID's and refuse to serve minors (1 coalition)	- Plan to provide merchants fake ID training - Plan to implement undercover fake ID checks	Four bar owners attend meetings with One ME coordinator and law enforcement officers
Increase consistency of local night club checking for fake identification (1 coalition)	Coalition members write apposition paper to the bar owner and City Council*	- Bar owner attends One ME sponsored bar owner meetings 20 bar staff members attend training on responsible beverage services - police patrol bar parking lot more regularly

Distribution of Alcohol to Minors by Minors

Change Targeted	Activities Conducted by Coalition	Steps Taken by Those Outside Coalition to Address Targeted Change
Reduce the number of locations where minors can congregate to drink (2 coalitions)	▪ Plan to find a way to light community parking lots well	
Decrease shoplifting of alcohol in grocery stores (1 coalition)	▪ Work with stores to develop procedures for alcohol sales as exists for cigarette sales ▪ Work with stores to post signs about store surveillance ▪ Work to persuade stores to position cameras to effectively capture on tape shoplifting of alcoholic beverages ▪ Support community organizations who work to increase the number of alternative activities for youth ▪ Plan to explore ideas for events and activities that might appeal to youth ▪ Support SAFE night*	
Increase youth participation in alternative activities to drinking (5 coalitions)	▪ Work with high school guidance counselor, Juvenile Probation, and District Attorney to develop alternative activities ▪ Plan to provide alternatives to keg parties ▪ Plan to hold events to attract youth like Battle of the Bands, at which alcohol is not present (2 coalitions) ▪ Plan to work with Media and IT teacher at the high school	